



JB Pritzker, Governor

Dulce M. Quintero, Secretary

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DATE: December 1, 2025

## **MEMORANDUM**

TO: The Honorable Don Harmon, Senate President  
The Honorable John F. Curran, Senate Minority Leader  
The Honorable Emanuel “Chris” Welch, Speaker of the House  
The Honorable Tony McCombie, House Minority Leader

FROM: Dulce Quintero *Dulce Quintero*  
Secretary *by Anusha*  
Illinois Department of Human Services

SUBJECT: **Home Illinois Annual Report**

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The Illinois Department of Human Services (IDHS) respectfully submits the Home Illinois Annual Report and associated documents on behalf of the Illinois Office to Prevent and End Homelessness in fulfillment of the requirements set forth in Public Act 103-0269 and Public Act 101-98.

This submission includes the following components:

- The Interagency Task Force on Homelessness’s Annual Report to the Governor and the General Assembly, as required under Public Act 103-0269 and 20 ILCS 1305/10-75 (beginning on page 1).
- The Community Advisory Council on Homelessness’s Annual Recommendations to the Interagency Task Force on Homelessness, submitted pursuant to Public Act 103-0269 and 20 ILCS 1305/10-75 (beginning on page 71).
- The Youth Homelessness Prevention Subcommittee’s Annual Report to the Governor and the General Assembly, as required under Public Act 101-98 / 15 ILCS 60 (beginning on page 68).

If you have any questions or comments, please contact Christine Haley, Chief Homelessness Officer, at [christine.haley@illinois.gov](mailto:christine.haley@illinois.gov).

cc: The Honorable JB Pritzker, Governor  
John W. Hollman, Clerk of the House  
Tim Anderson, Secretary of the Illinois Senate  
Legislative Research Unit  
State Government Report Center



State of Illinois  
Illinois Department of Human Services



# HOME ILLINOIS: ILLINOIS' PLAN TO PREVENT AND END HOMELESSNESS

## Annual Report

July 1, 2024 – June 30, 2025

ILLINOIS INTERAGENCY TASK FORCE ON HOMELESSNESS

OFFICE TO PREVENT AND END HOMELESSNESS

DECEMBER 2025





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# WHO WE ARE

## VISION



No resident in the State of Illinois lives on the street, in a shelter, or in overcrowded housing. Illinoisians earn a living wage that allows them to afford housing in their community, without fear of eviction. When a housing crisis occurs, safety net supports allow quick resolution to stabilize housing.

## MISSION

Coordinating State of Illinois agency strategies and investments and partnering with the community to build a strong safety net and permanent housing for Illinoisans facing homelessness and housing insecurity.



# ILLINOIS INTERAGENCY TASK FORCE ON HOMELESSNESS

**Delrice Adams**, Executive Director, Illinois Criminal Justice Information Authority

**Brian Durham**, Executive Director, Illinois Community College Board

**Kristin Faust**, Executive Director, Illinois Housing Development Authority

**Christine Haley**, Chief, Illinois Office to Prevent and End Homelessness (Chair)

**Latonya Hughes**, Director, Illinois Department of Corrections

**Representative Lilian Jimenez**, State Representative 4th District

**Senator Adriane Johnson**, State Senator 30th District

**Brendan Kelly**, Director, Illinois State Police

**Mary Killough**, Director, Illinois Department on Aging

**Raymond Marchiori**, Director, Illinois Department of Employment Security

**Heidi Mueller**, Director, Illinois Department of Children and Family Services

**Ginger Ostro**, Executive Director, Illinois Board of Higher Education

**Terry Prince**, Director, Illinois Department of Veterans' Affairs

**Dulce Quintero**, Secretary, Illinois Department of Human Services

**Kristin Richards**, Director, Illinois Department of Commerce and Economic Opportunity

**Representative Kevin Schmidt**, State Representative 114th District

**Marc Staley**, Deputy Director, Governor's Office of Management & Budget

**Robert Vickery**, Acting Director, Illinois Department of Juvenile Justice

**Sameer Vohra**, Director, Illinois Department of Public Health

**Elizabeth Whitehorn**, Acting Director, Illinois Department of Healthcare and Family Services

**Katherine Ulmer**, State Coordinator for McKinney-Vento Homeless Education, Illinois State Board of Education

# COMMON ACRONYMS

ARPA	American Rescue Plan Act
CoC	Continuum of Care
DBHR	IDHS Division of Behavioral Health and Recovery
DoE	U.S. Department of Education
DCEO	Illinois Department of Commerce and Economic Opportunity
DCFS	Illinois Department of Children and Family Services
HFS	Illinois Department of Healthcare and Family Services
HMIS	Homeless Management Information System
HUD	U.S. Department of Housing & Urban Development
IBHE	Illinois Board of Higher Education
ICCB	Illinois Community College Board
ICJIA	Illinois Criminal Justice Information Authority
IDES	Illinois Department of Economic Security
IDHS	Illinois Department of Human Services
IDJJ	Illinois Department of Juvenile Justice
IDoA	Illinois Department on Aging
IDOC	Illinois Department of Corrections
IDPH	Illinois Department of Public Health
IDVA	Illinois Department of Veterans Affairs
IEL	Inclusive Economy Lab, University of Chicago Urban Labs
IHDA	Illinois Housing Development Authority
IHRC	Illinois Homeless Response Collaborative
ITFH	Illinois Interagency Task Force on Homelessness
OPEH	Illinois Office to Prevent & End Homelessness
ISBE	Illinois State Board of Education
ISP	Illinois State Police
PHA	Public Housing Authority
PIT	Point-in-Time Count
PSH	Permanent Supportive Housing
SRN	Statewide Referral Network

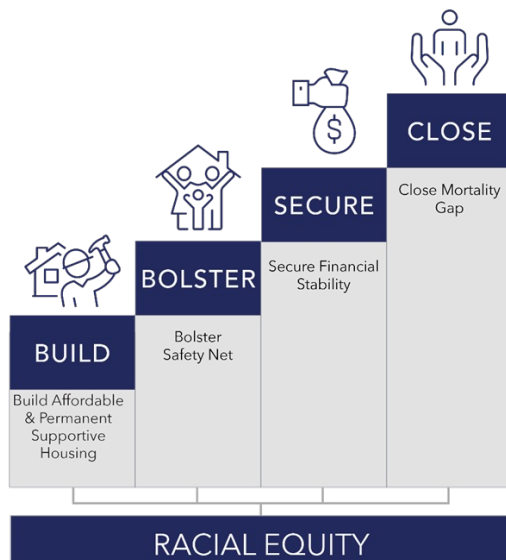
# ILLINOIS PLAN TO PREVENT AND END HOMELESSNESS

JULY 1, 2024-JUNE 30, 2025

The Illinois Interagency Task Force on Homelessness (ITFH) delivers the FY2025 Annual Update on implementation of Home Illinois FY25-26: Illinois' Plan to Prevent and End Homelessness (Plan). The Plan is the framework for Illinois to meet the goals outlined in Public Act 103-0269:

- Address homelessness and reach functional zero of homelessness
- Address unnecessary institutionalization
- Improve health and human services outcomes for people experiencing homelessness
- Strengthen the safety nets that contribute to housing stability

The organizing themes of the Plan are:



1. building affordable and Permanent Supportive Housing (PSH),
2. bolstering safety nets,
3. securing financial stability, and
4. closing the mortality gap between people experiencing homelessness and and their housed neighbors.

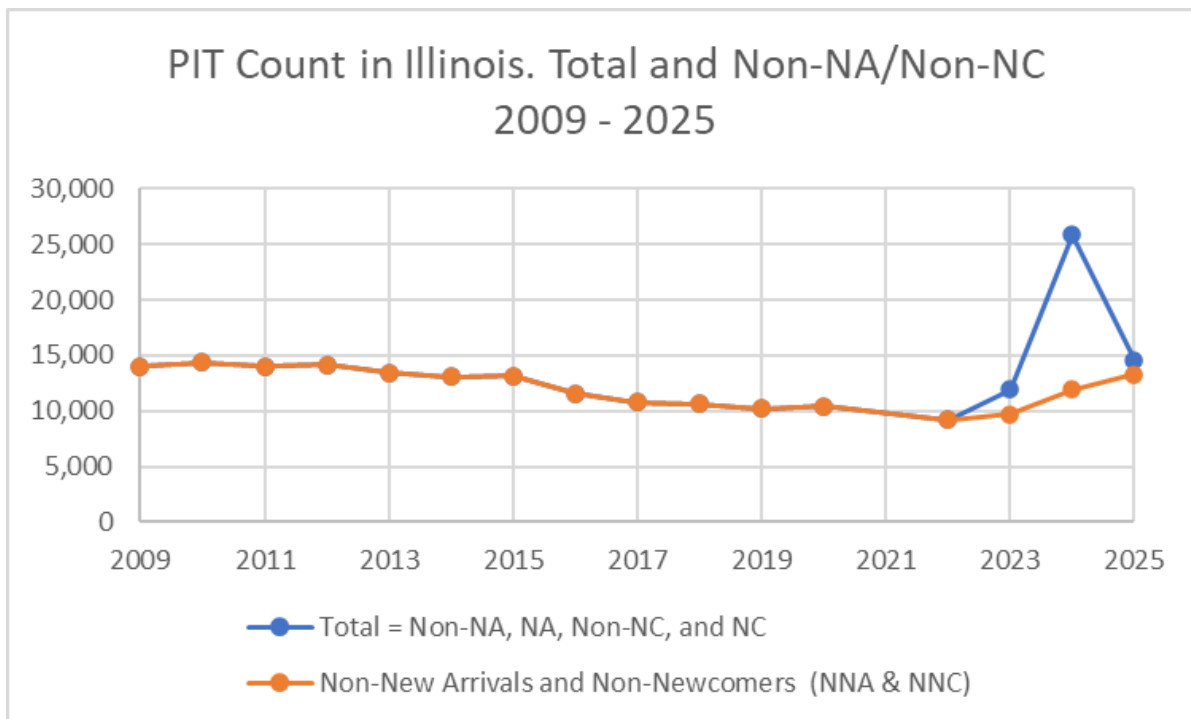
All Home Illinois activities drive toward at least one of these core goals. Underlying the organizing pillars, the foundational goal of the plan is ending the racial disparity that exists in homelessness. A study by the University of Illinois Chicago Institute for Research on Race and Public Policy in partnership with the Office to Prevent and End Homelessness (OPEH) found that, in Illinois, Black residents are almost eight times more likely to experience homelessness than white residents. These disparities are severe and pervasive and must be

centered in our efforts to prevent and end homelessness for all people. This understanding infuses Home Illinois.

For further information on data and other context on homelessness in Illinois, see [Home Illinois: Illinois' Plan to Prevent and End Homelessness July 1, 2024 - June 30, 2026.](#)

# ANALYSIS OF 2025 ILLINOIS POINT IN TIME COUNT DATA

From January 2024 to January 2025, Illinois' overall Point-in-Time Count (PIT Count) dropped from 25,832 to 14,571 people. This was a 44% decrease. Eight Illinois Continuums of Care (CoC) saw increases in the number of people counted and eleven CoCs saw decreases. The Chicago CoC saw a 60% decrease. This was due in large part to a decrease in the new arrival population experiencing homelessness in Chicago. For 2025, the definition and label changed to newcomer. Of Chicago's PIT population of 7,452 in January 2025, 1,282 people were newcomers.



## Percent Change in Homelessness by CoC: 2024-2025

COC Number	CoC Agency	2020 Total	2022 Total	2023 Total	2024 Total	2025 Total	% Change in Total Homeless 2024-2025
IL-510	All Chicago Making Homelessness History	5,390	3,875	6,139	18,836	7,452	-60%
IL-500	McHenry County Continuum of Care to End Homeless	155	92	125	160	121	-24%
IL-512	Central Illinois Continuum of Care	408	241	256	396	303	-23%
IL-520	Southern Illinois Coalition for the Homeless	233	248	230	261	215	-18%
IL-515	South Central Illinois Continuum of Care	123	157	170	266	224	-16%
IL-517	Continuum of Care for Kane County	410	391	461	563	477	-15%
IL-502	Lake County Coalition for the Homeless	292	431	467	705	617	-12%
IL-501	Northern Illinois Homeless Coalition	465	406	445	486	435	-10%
IL-513	Heartland Housed	294	264	306	388	374	-4%
IL-506	Will County Continuum of Care	276	219	343	357	350	-2%
IL-508	St. Clair County Continuum of Care	298	197	264	237	233	-2%
IL-518	Northwestern Illinois Continuum of Care	135	280	232	334	340	2%
IL-514	DuPage County Continuum of Care	328	555	525	480	527	10%
IL-516	Macon County Continuum of Care & Homeless Advisory Council	135	93	110	140	156	11%
IL-511	Alliance to End Homelessness in Suburban Cook County	846	1,096	1,056	1,188	1,368	15%
IL-503	Champaign County Continuum of Services Providers to the Homeless	140	137	215	279	355	27%
IL-507	Home for All Continuum of Care	311	337	420	492	635	29%
IL-504	Madison County Partnership to End Homelessness	79	96	88	121	170	40%
IL-519	West Central Illinois Continuum of Care Consortium	113	97	95	143	219	53%
Total	State of Illinois	10,431	9,212	11,947	25,832	14,571	-44%

### Unsheltered Trends

Illinois saw an overall unsheltered PIT count drop from 2,664 people counted in 2024 to 2,074 counted in 2025. This was a 22% decrease in the number of people experiencing unsheltered homelessness. Seven CoCs saw increases and twelve CoCs saw decreases in the number of unsheltered people. The Northwestern Illinois and Kane County Continuums of Care each saw single year decreases of more than 80% in the number of people experiencing unsheltered homelessness.

<b>COC Number</b>	<b>CoC Agency</b>	<b>2020 Unsheltered</b>	<b>2022 Unsheltered</b>	<b>2023 Unsheltered</b>	<b>2024 Unsheltered</b>	<b>2025 Unsheltered</b>	<b>% Change Unsheltered Homeless 2024-2025</b>
IL-518	Northwestern Illinois Continuum of Care	18	59	23	192	23	-88%
IL-517	Continuum of Care for Kane County	65	57	51	122	22	-82%
IL-520	Southern Illinois Coalition for the Homeless	46	34	15	55	22	-60%
IL-513	Heartland Housed	43	26	20	26	13	-50%
IL-500	McHenry County Continuum of Care to End Homeless	1	11	35	20	15	-25%
IL-510	All Chicago Making Homelessness History	1,529	1,263	990	1,634	1,316	-19%
IL-502	Lake County Coalition for the Homeless	34	15	30	75	63	-16%
IL-506	Will County Continuum of Care	42	15	98	38	33	-13%
IL-511	Alliance to End Homelessness in Suburban Cook County	118	99	72	114	104	-9%
IL-504	Madison County Partnership to End Homelessness	32	15	32	60	56	-7%
IL-507	Home for All Continuum of Care	37	32	39	56	54	-4%
IL-515	South Central Illinois Continuum of Care	32	51	51	80	79	-1%
IL-508	St. Clair County Continuum of Care	136	94	9	19	23	21%
IL-514	DuPage County Continuum of Care	10	31	33	26	32	23%
IL-503	Champaign County Continuum of Services Providers to the Homeless	12	2	9	42	56	33%
IL-516	Macon County Continuum of Care & Homeless Advisory Council	23	9	22	27	39	44%
IL-512	Central Illinois Continuum of Care	52	22	22	62	91	47%
IL-501	Northern Illinois Homeless Coalition	45	61	66	9	14	56%
IL-519	West Central Illinois Continuum of Care Consortium	3	5	2	7	19	171%
<b>Total</b>	<b>State of Illinois</b>	<b>2,278</b>	<b>1,901</b>	<b>1,619</b>	<b>2,664</b>	<b>2,074</b>	<b>-22%</b>

See Appendix B for additional data.

# IMPLEMENTING HOME ILLINOIS:

JULY 1, 2024 - JUNE 30, 2025

Below, please find the progress made by OPEH, the Interagency Task Force on Homelessness and community partners in the implementation of Home Illinois. The activities reported are in process or completed during this reporting period.

## Annual Updates: Office to Prevent and End Homelessness

The Office to Prevent and End Homelessness implemented the following activities to support all strategies within the plan.

Type	Activity	Status	Where we are June 30, 2025
Policy	Respond to the recommendations of the Illinois Justice Project (ILJP) on how to support the housing needs of persons with lifetime bans	In Process	In July 2025, OPEH and Chicago Funders Together to End Homelessness sponsored a delegation of State and community leaders to learn about a PSH program for returning citizens in Ohio, called Returning Home Ohio (RHO). Participating organizations included Illinois Department of Corrections (IDOC) Director Hughes, Illinois Criminal Justice Information Authority (ICJIA) Director Adams and leadership from Treatment Alternatives for Safer Communities (TASC), ILJP, the Office of the First Lady, the Office of Lt. Gov. Stratton, the Illinois Housing Development Authority (IHDA), and Illinois Department of Human Services (IDHS) leadership from the Division of Behavioral Health and Recovery (DBHR) and the Office of Firearm Violence of Prevention (OFVP). RHO is a longstanding PSH program in Ohio through which the IDOC-equivalent agency supports the housing stability of returned citizens. RHO participants have a drastically lower recidivism rate than the general population. Through Home Illinois funding and interagency collaboration, a pilot program modeled after RHO is in the planning phase and led by ICJIA. After the visit, ICJIA created an interagency steering committee to guide the pilot, which includes the state leadership mentioned above.
Policy	Convene a racial equity roundtable on Latino homelessness and produce a written report; within the analyses include the housing stability needs of migrant farmworkers as indicated by the Illinois rural homelessness report	In Process	This is in process, and the report is anticipated to be released in mid-FY26. The Roundtable convened and met in FY25 to inform University of Illinois Chicago (UIC) Institute for Research on Race and Public Policy's (IRRPP) research. IRRPP completed qualitative and quantitative research including focus groups with people with lived expertise and service providers. The report of research findings and recommendations is anticipated to be released in the third quarter of FY26.

Type	Activity	Status	Where we are June 30, 2025
Policy	Convene a racial equity roundtable on Native American homelessness and produce a written report	In Process	This is anticipated to launch in the second quarter of FY26, after the conclusion of the Latino Homelessness Roundtable and report development.
Policy	Complete an analysis on food access for unhoused populations; Build an implementation plan based on study recommendations	In Process	The report, <i>Hunger Pains: Assessing Food Access for Unhoused Individuals in Illinois</i> , was released in May 2025. It contains qualitative and quantitative findings of unhoused people's experiences related to food access and recommendations for the state to improve access. Find the full report at: <a href="https://irrpp.uic.edu/research-collaborations/opeh/">https://irrpp.uic.edu/research-collaborations/opeh/</a> .
Process	Explore statewide coverage for 211 as the primary access point for homelessness prevention and shelter resources statewide	In Process	Completed 2nd year of pilot. FY25 pilot will expand access to families identified through McKinney-Vento Liaisons and develop IDHS capacity to distribute cash transfer payments.
Process	Convene a work group for State employee program staff to discuss innovative and promising practices, and to identify areas for inter-agency collaboration	In Process	This is in process for FY26. OPEH is in the hiring process for a special projects manager to lead this work.
Process	Complete feasibility analysis of a statewide homelessness data warehouse, potentially replicating California's homeless data integration system	In Process	This is a large, multi-year process. In FY25, a Homelessness Research and Evaluation Administrator position was created within OPEH, which will be hired in FY26. This is a new senior position which will lead this work.  At the same time, several data initiatives are improving OPEH's data capacity and building a baseline to approach a statewide HMIS warehouse including HMIS research through the Youth Homelessness System Improvement (YHSI) project (see YHSI update pg. 46), a recently developed internal Home Illinois data dashboard prototype, and pursuit of a statewide eviction dashboard (see update pg. 29).
Process	Convene legislatively mandated committees: Interagency Task Force on Homelessness, Community Advisory Council on Homelessness (CACH) and Youth Homelessness Prevention Subcommittee	Ongoing	OPEH provides staff support for the three committees. The ITFH met on the following dates: 09/12/2024, 12/12/24, 03/13/2025, 06/09-06/10/2025. The CACH met on the following dates: 09/04/2024, 12/04/2024, 03/05/2025, 06/09-06/10/2025. The Subcommittee met on the following dates: 08/22/2024, 10/01/2024, 12/03/2024, 02/04/2025, 04/01/2025, 06/03/2025.
Process	Pursue state-level eviction and housing stability dashboard through engagement of county eviction courts	In Process	The University of Chicago Inclusive Economy Lab (IEL) led efforts to expand eviction data availability. In FY25, IEL presented its findings and suggested next steps to state leadership.

Type	Activity	Status	Where we are June 30, 2025
Process	Create a homeless housing and services workforce stability workgroup; Create an action plan on how to support community- based organizations to increase and stabilize their workforce	In Process	<p>This workgroup, including members of the CACH and other community experts, was convened in FY25 and will continue to meet in FY26. The workgroup has developed concrete recommendations for the state to consider to support the stability of the supportive housing and homeless services workforce. These recommendations are contained in the CACH’s 2025 recommendations to the ITFH and to OPEH.</p> <p>Also, in FY25, Northern Illinois University completed its report to OPEH on the homeless services workforce. This can be seen here: <a href="https://www.dhs.state.il.us/page.aspx?item=171132">https://www.dhs.state.il.us/page.aspx?item=171132</a>.</p> <p>Additionally, the Illinois Homelessness Response Collaborative (IHRC) contains a stream of focus on supporting local communities’ workforces, particularly on supporting the advancement of people with lived expertise.</p>
Process	Complete an Illinois homeless prevention action plan in alignment with current research and All In: The Federal Strategic Plan to Prevent and End Homelessness	In Process	<p>OPEH is hiring Special Projects Managers (SPM), one of whom will be dedicated to prevention.</p> <p>Additional activities related to prevention OPEH completed in FY25 include presenting with IEL to IDHS Executive Leaders and the Governor’s Office on research into prevention and opportunities for the state to increase access to prevention resources and reduce administrative barriers to access. On 2/24/2025, OPEH presented in the University of California Los Angeles at an invite-only national convening on homelessness prevention.</p>
Process	Create a housing resources tool kit for use by members of the Illinois General Assembly	Not Started	Work on this is planned in FY26.
Process	Invest in state data collection and reporting infrastructure to understand progress on reducing homelessness and racial disparities	In Process	<p>In FY25, progress was made on this including developing an internal prototype Home Illinois dashboard, building a foundation to better understand and communicate programmatic metrics. OPEH staff has built their capacity to do data analysis to understand progress on reducing homelessness and racial disparities, such as replicating analysis in the Black Homelessness report to the present date to keep the analysis current.</p>
Process	Convene municipal leaders about local data and analysis included in the report Black Homelessness in Illinois: Structural Drivers of Inequality	Completed	<p>OPEH presented to local municipal and community leaders on <i>Black Homelessness in Illinois: Structural Drivers of Inequity</i>. This includes but is not limited to presentations to CoCs in Suburban Cook County, Chicago, DuPage County, national and Chicago-area Funders Together to End Homelessness, the National Alliance to End Homelessness conference in July 2024, and at the Corporation for Supportive Housing (CSH) conference in May 2025.</p>

Type	Activity	Status	Where we are June 30, 2025
Process	Create a position within OPEH to lead Black, Latino and Native American structural disparities report action plan implementation	In Process	This is in process and will be completed in FY26. One OPEH SPM will focus on racial equity action plan implementation.
Process	Explore state oversight mechanisms for persons experiencing homelessness to resolve complaints in homeless housing and services programs	In Process	One of the OPEH SPMs is will focus on this and other activities related to supporting people with lived expertise. This position posted and closed in June 2025 and is currently going through the hiring process.
Process	Convene workgroup to develop state-focused strategies to increase access to statewide and federal benefits for people experiencing homelessness	In Process	This work group launched in FY25 and is continuing in FY26, supported by consultants through the SHPA Homelessness Education and Technical Assistance Center (TA Center). The work group is focused on recommendations related to Supplemental Nutrition Assistance Program (SNAP) and Medicaid access and supporting access to Social Security benefits for eligible people in IDOC custody pre- and post-release. The work group is actively meeting with IDHS, OPEH, and IDOC to discuss strategies.
Process	Support communities in reaching their goals in ending veterans' homelessness by providing data and technical assistance support	In Process	This work is in progress and has grown into a component of the larger IHRC, which was developed in FY25 and launched in FY26. IHRC is a statewide partnership with local homeless systems throughout the state. The Illinois Homeless Response Collaborative has begun with 18 of the state's 19 CoCs participating. Funding for CoCs to support expanded system capacity is rolling out in FY26. Training on data reporting requirements will begin in early FY26 with the goal of real-time, quality data reporting to the State beginning by the end of the calendar year. Technical assistance efforts on homeless prevention and veteran homelessness will be launching in Q2 FY26.
Process	Further internal data analysis infrastructure to better understand the impact of investments to address Black-White disparities in homelessness	In Process	OPEH, IDHS, and the UIC Institute for Healthcare Delivery Design developed an internal prototype Home Illinois dashboard, building a foundation to better understand and communicate programmatic metrics. Additionally, OPEH staff has built their capacity to do this analysis, such as replicating analysis in the Black Homelessness report to the present date to keep analysis current. Additionally, additional staff are being brought on to focus on data and racial equity report implementation, who will advance this work further.

Type	Activity	Status	Where we are June 30, 2025
Program	Continue the implementation of the Homelessness Education and Technical Assistance Center (TA Center); Provide technical assistance to State agencies with new legislatively mandated or agency-initiated housing programs to quickly onboard programs; Provide technical assistance to community providers on implementation of promising practices in service delivery which may include low-barrier service delivery, increasing capacity to bill Medicaid and improving quality data	Ongoing	The TA Center was awarded through a public NOFO for FY26, taking the project out of the pilot stage. Recent projects of the TA Center include but are not limited to supporting 100-day challenges with communities across Illinois, developing training for police compassionate responses to encampments, implementing the IHRC, and developing and delivering a training on capital projects for homeless service providers.
Program	Support the exhibition of The Evicted Exhibit in at least one new community in Illinois	Completed	The Evicted Exhibit, supported by OPEH, completed its final tour stops in FY25 with installations in the Quad Cities and a return visit to Chicago with a multi-month installation at Harold Washington Library. The Exhibit promoted conversations in communities across Illinois on the impact of evictions and opportunities to support housing stability. Two events happened in conjunction with the exhibit, one on ending evictions and one on hunger and homelessness.
Program	Support capacity building and curriculum development for communities to address "Not in my backyard" (NIMBY) challenges in shelter and permanent supportive housing development	Completed	Through support from OPEH and the TA Center, this curriculum was developed and delivered by IFF in FY25. It was offered in both a remote, synchronous training and as an in-person training at the 2025 Home Illinois Summit. The training recording is now available online at <a href="https://www.dhs.state.il.us/page.aspx?item=171492">https://www.dhs.state.il.us/page.aspx?item=171492</a> under "IFF Capital Development Project Training Series."
Program	Create community engagement and communications campaign on how to access homelessness prevention and shelter resources	In Process	This work began in FY25 and is continuing in FY26. OPEH is working with DCC, a communications firm IDHS has an existing contract with for public communications projects. In FY25, a work group consisting of DCC and OPEH staff, CACH members, and other engaged community members met several times to inform the campaign and develop initial collateral and messaging. A feedback session was also held with leaders with lived expertise. The campaign launch is planned for FY26.
Program	Create community engagement and communications campaign to change the narrative on the root cause of homelessness	In Process	Same update as directly above. These two communications goals are being addressed through one multimedia communications campaign.

# PROJECT SPOTLIGHT

B.R.I.D.G.E. TO HOME



*Illinois leaders from IDOC, the Lieutenant Governor's Office, the Office of the First Lady, IHDA, ICJIA, IDHS, OPEH, and partner agencies visit Ohio to learn from the **Returning Home Ohio** program – inspiring Illinois' **Bridge to Home** initiative.*

Building Resilience, Independence, Determination, Growth, and Empowerment, or B.R.I.D.G.E. to Home (B2H), is an innovative statewide reentry housing initiative. Through coordinated leadership by Treatment Alternatives for Safe Communities (TASC), the Illinois Department of Corrections (IDOC), the Illinois Criminal Justice Information Authority (ICJIA), and the Illinois Office to Prevent and End Homelessness (OPEH), B2H bridges the gap between incarceration and sustainable community living. The program is in its pre-launch phase, with the first cohort of returning community members expected to begin housing placement in FY25. B2H's mission is to support returning community members as they rebuild their lives—restoring dignity, independence, and stability. The initiative seeks to reduce homelessness, disrupt cycles of reincarceration, and strengthen communities across Illinois.

Drawing inspiration from the successful Returning Home Ohio (RHO) framework, B2H envisions a unified statewide system that combines immediate housing placement, case management, and behavioral health supports. The program will work to ensure that individuals released from IDOC correctional facilities transition directly into supportive housing, where they are immediately connected to mentors, clinicians, and case managers who can help rebuild stability.

Referrals to B2H will begin up to ninety days before an individual's release, allowing case managers to assess the housing need, develop individualized service plans, and coordinate housing placements prior to reentry. This pre-release approach prevents gaps in support and enables participants to move directly into permanent housing upon release – avoiding emergency shelters or temporary placements.

At the heart of B2H is a growing network of landlord partners who work collaboratively to expand access to affordable, safe, and well-maintained housing options across Central and Southern Illinois. Units will be inspected and prepared before move-in to meet quality and habitability standards and landlords will be supported through guaranteed rent payments, optional incentive bonuses, and access to a 24-hour support line that ensures they remain active, valued partners in this statewide initiative.

Once housed, participants will be offered a wide range of supportive services. A multidisciplinary team—including peer mentors, community support specialists, and clinicians—will provide wraparound services tailored to each participant's goals. These supports include life-skills training, budgeting and financial coaching, behavioral health treatment, medical care coordination, transportation assistance, and employment readiness support. During the critical early weeks after move-in, staff will conduct daily check-ins. Over the following months, case managers will continue to monitor progress, adjust individualized plans, and ensure that each participant's path toward long-term goals remain on track.

Through these combined efforts, B2H will expand reentry housing capacity across Illinois while advancing the goals of the State's broader Home Illinois plan to prevent and end homelessness. By centering housing as the foundation of successful reentry, B2H aims to reduce recidivism and build stronger, more inclusive pathways to stability and belonging. The program's first housing placements, anticipated in FY26, will mark a significant milestone in Illinois' ongoing commitment to supporting individuals in returning home.

# STRATEGY #1:

## BUILD AFFORDABLE & PERMANENT SUPPORTIVE HOUSING

The key strategy for ending homelessness is building more affordable and permanent supportive housing. These activities drive toward the State’s goals of expanding the supply of and access to affordable and permanent supportive housing.

### Existing Activities

Agency	Type	Activity	Where we are June 30, 2025
IHDA	Policy	Maintain funding for dedicated annual PSH Development Program funding round	<p>In May 2025, IHDA's Board approved 7 developments totaling just over \$50 million in financing to create 129 units. The total funding amount included \$15 million in HOME Investment Partnerships American Rescue Plan Program (HOME-ARP) funding, which IHDA received to serve people who meet the specified qualifying population criteria as outlined in its guidance documents.</p> <p>IHDA intends to continue hosting an annual PSH Development Program funding round pooling available resources and will continue to explore and identify funding opportunities for PSH.</p>
IHDA	Policy	Produce at least 300 PSH units across all IHDA programs annually	In FY25, IHDA's Board approved 615 PSH units across all its funding programs.
IDHS	Process	The Division of Developmental Disabilities continues to work in conjunction with IHDA, the Illinois Council on Developmental Disabilities (ICDD), and CSH to strengthen the pipeline for supportive housing	In FY25, DDD continued to meet with IHDA and other housing partners regarding growing supportive housing.

Agency	Type	Activity	Where we are June 30, 2025
IDJJ	Process	Increase agency capacity to strengthen and sustain housing supports for youth, such as employment and education activities	<p>IDJJ has added additional partners and programs to promote independence including construction, culinary, and alternative energy trades.</p> <p>These include employment, education, and skill based programs such as Education Design Development and Research (EDDR) to provide construction, culinary, sanitation, and alternative energy training and certifications to promote independence. A few standing partnerships include GEO, Varsity Tutors, The Outlet, DREAM, GRO, First Institute, and SER. IDJJ has an internal mapping tool developed with all current community partners to aid in identifying and locating individualized services statewide. Behavioral Health Care and Ongoing Navigation (BEACON) is also now available statewide to help identify behavioral health services to youth and families.</p>
IHDA	Process	Provide technical assistance and training to property managers on increasing access to units through changes in project Tenant Selection Plans. Partnering with CSH and CoC Coordinated Entry Systems, strengthen referral processes for persons experiencing homelessness to access SRN units	<p>IHDA continues to hold quarterly trainings including best practices around tenant selection practices and fair housing. CSH produced a self-paced training series for property managers that includes information on Reasonable Accommodations and other topics related to legal documents and these will be updated to include additional topics as relevant. In conjunction with IHDA's annual Permanent Supportive Housing Development Program funding round, IHDA also drafted and will make available in FY26 additional guidance on best practices related to low-barrier tenant screening.</p>
ICJIA	Program	<p>Administer funds to support the Flexible Housing Pool Reentry Pilot, a joint effort with IDOC and the Center for Housing and Health (CHH). Funding is earmarked for PSH for the following groups of people:</p> <ul style="list-style-type: none"> <li>• Those in need of placements who are currently being held past their Mandatory Supervised Release and who have mental health needs - from moderate to severe.</li> <li>• Individuals with Chronic Diseases</li> <li>• Murphy Class</li> <li>• Parole diversions</li> </ul>	<p>47 individuals engaged; 22 actively enrolled as of June 30; 25 exited. In Year Two, CHH strengthened service delivery by adding a Behavioral Health Specialist for in-home therapy, tightening leadership oversight, and building program workflows and evaluation tools. Key challenges included high housing costs averaging \$1,500 per month. In SFY26, CHH is transitioning case management to a different partner agency, whose behavioral health and housing support capacity is expected to improve client stability and reduce recidivism.</p>

Agency	Type	Activity	Where we are June 30, 2025
IDHS	Program	Advance the Housing is Recovery Program through strengthening partnership with IDOC, hospitals, and community organizations to identify eligible individuals; A change in the eligibility criteria is currently going through the legislation process and if passed, will allow more referrals; Build and strengthen relationships with local landlords, community businesses and faith-based organizations to share resources; Convene quarterly learning collaboratives with other providers that offer housing and mental health and/or substance use treatment services	<p>At the end of FY25, IDHS lost a provider as they were having difficulty maintaining adequate staff and adequate housing options for this population. While IDHS was able to successfully transition 135 individuals either into permanent or temporary housing, IDHS continues to have trouble placing this population in housing.</p> <p>The legislative change did pass (P.A. 103-0970), lowering the program eligibility age from 21 to 18.</p> <p>Providers are making efforts to continue to strengthen relationships with community partners and housing providers to secure more permanent housing options.</p>
IDHS	Program	Through the Supportive Housing Services Program, fund services for persons living in Permanent Supportive Housing; service delivery includes case management, advocacy, counseling, job training, and transportation	In FY25, SHP served 11,987 individuals and provided 965,785 supportive services.
IDHS	Program	Maintain the Division of Behavioral Health & Recovery's Permanent Supportive Housing program serving 150 residents per FY25 and FY26	<p>As of June 30, 2025, there are currently 414 households in this program. Including all household members, there are 721 people housed by the program. Among the 721 people housed, 270 are children under the age of 18.</p> <p>Since April 2022, 624 households and 1,030 people were housed through the program.</p>
IDHS	Program	Launch and administer Forensic Permanent Supportive Housing	This program was launched via NOFO in Spring 2025 and was awarded to Volunteers of America of Illinois and to Arrowleaf. This program will provide PSH to forensic consumers who have been found Unfit to Stand Trial (UST) or Not Guilty by Reason of Insanity (NGRI) and who can be served with outpatient treatment services but do not have stable housing. This program will provide immediate temporary housing (bridge housing) and pre-tenancy support while the providers work with the consumer to secure Permanent Supportive Housing.
IDHS	Program	Transition people with disabilities out of nursing facilities that are in counties outside of Cook County and not covered by a Consent Decree	Transitioned 91 people out of nursing homes and into their communities through the community reintegration program. Spent a total of \$327,476.
IDHS	Program	Keeping people in their homes by providing home modifications through the Home Services Program	Spent \$2,290,659 in the home services program for a total of 194 customer home modifications.

Agency	Type	Activity	Where we are June 30, 2025
IDHS	Program	Keeping people in their homes by providing home modifications; through the Home Services Program and the Illinois Network of Centers for Independent Living, and assistive technologies.	Paid \$3,449,736.08 to INCIL for the completion of 82 home modifications in FY25 with 215 applicants approved for services through the program. This is an advance pay model.
IDPH	Program	Administer the Ryan White and Housing for Persons Living with AIDS (HOPWA) programs, providing support services, short-term rental assistance, tenant-based rental assistance, mortgage and utility assistance; IDPH HIV/AIDS Section's Ryan White Part B Program integrates HIV Housing Portfolio from funds received by HUD HOPWA and funding from the U.S. Health Resources and Services Administration's (HRSA); IDPH's HIV/AIDS Section awards eight grantees statewide who oversee the full-service delivery of Core and Support Services allowed under both these federal awards, which encompasses HIV Housing; Grants provide tenant-based rental assistance, mortgage assistance, and permanent housing planning services	<p>In FY25, the following number of people were served by the IDPH program, targeted to people living with HIV/AIDS.</p> <p>Number of Unique Clients Served by Service:</p> <p>Tenant-Based Rental Assistance: 505  Tenant-Based Utility Assistance: 108  Emergency Rental Assistance: 247  Emergency Utility Assistance: 214  Emergency Mortgage Assistance: 31  Permanent Housing Placement: 20</p> <p>Number of Service Units by Service:</p> <p>Tenant-Based Rental Assistance: 4686  Tenant-Based Utility Assistance: 744  Emergency Rental Assistance: 409  Emergency Utility Assistance: 409  Emergency Mortgage Assistance: 63  Permanent Housing Placement: 20</p>
IHDA	Program	Through the HOME Investment Partnerships Program-American Rescue Plan (HOME-ARP) statewide allocation of \$62 million, create new rental units and non-congregate shelter for homeless households	<p>IHDA released two Requests for Applications (RFA) related to HOME-ARP funding in August 2024. The first, IHDA's PSH Development Program RFA, included the option to request HOME-ARP funds for rental developments meeting HOME-ARP criteria. In May 2025, IHDA's Board approved awards under the PSH Development Program, including \$15 million in HOME-ARP funding to four projects.</p> <p>Second, IHDA released an RFA for the HOME-ARP Non-Congregate Shelter Development Program requesting applications for projects to expand the availability of quality shelter space statewide. IHDA received six applications in February 2025, and awards will be announced in FY26.</p>

Agency	Type	Activity	Where we are June 30, 2025
IHDA	Program	Administer the Rental Housing Support Program	Established in 2007 by the Illinois General Assembly, the Rental Housing Support Program (RHSP) uses revenues from property transfer fees to fund permanent rental housing to people below the 30% AMI. In FY25, RHSP renewed agreements with nine Local Administering Authorities (LAAs) and approved two new LAA agreements to replace one that dropped out of the program. As of June 30, 2025, RHSP has agreements with 17 total LAAs and 29 Long-Term Operating Support (LTOS) developments to offer low-income rental units throughout the state (excluding City of Chicago). Contracts are renewable every three years for LAAs and 15 years for LTOSs subject to IHDA approval.
IHDA	Program	Administer the Rental Housing Support Program Re-Entry Pilot	The RHSP Re-Entry Pilot began in 2019 with a Request for Proposals Round budgeting \$3 million to subsidize approximately 100 units. In this RFP, we received four applications totaling 75 units for the approximate budget of \$3 million. Since this original application period, we have housed over 75 individuals in the pilot. Contracts are renewable every three years subject to IHDA approval. IHDA is considering making additional awards via another RFP process in FY26.

## Expansion Activities

Agency	Type	Activity	Where we are June 30, 2024
IHDA	Policy	Continue to expand access to capital for developers or development team members of color by including point incentives in IHDA's programming, such as the 2024-2025 Low Income Housing Tax Credit Qualified Allocation Plan (QAP) and the annual PSH Development Program RFA	In FY25, IHDA continued to monitor the outcome of the point incentive for developments sponsored or co-sponsored by Black, Indigenous, or People of Color- ("BIPOC") led companies that was established in 2022 and maintained, with slight revisions, in the 2024-2025 QAP. IHDA also anticipates maintaining this incentive structure in the 2026 QAP. Final awards for 2024 9% Low-Income Housing Tax Credits (LIHTC) were made in July 2024 with 88% of projects (14 of the 16 awarded projects) receiving a point incentive for BIPOC participation. Final awards for 2025 9% LIHTC credits were made in June 2025 with 100% of projects (16 of the 16 awarded projects) receiving a point incentive for BIPOC participation. Awards for the 2025 PSH Development Program Round X were made in May 2025 with four of the seven awarded projects receiving a point incentive for BIPOC participation.
IHDA	Policy	Advocate for additional Federal and State funding as needed to go towards the annual PSH Development Round; Maintain this increased funding structure through FY25 and FY26	Secured an additional \$20 million in funding through the state Opioid Remediation Fund which has been incorporated into IHDA's PSH Development Program Round XII.
IHDA	Policy	<p>Work to update Statewide Referral Network (SRN) Intergovernmental Agreement (IGA) with State partners including updated definitions for eligible populations under the SRN and</p> <p>Section 811 Project Rental Assistance (PRA) Program, including assessing adding chronic homelessness under Section 811; Continue to allocate new funding under FY19 Cooperative Agreement</p>	<p>In collaboration with the Department of Health and Family Services (HFS), IDHS, and IDoA, IHDA made minor updates to the SRN IGA. The IGA was finalized and executed as of February 1, 2025.</p> <p>IHDA received an update from HUD that the Section 811 FY25 NOFO will be released and is anticipating applying for additional funding.</p> <p>Updated and executed a Referral Network IGA with State partners in February 2025. IHDA continues to allocate remaining funds under its FY19 Cooperative Agreement. In 2025, IHDA's Board approved Rental Assistance Contracts for six developments, providing \$2,793,360 for 36 total units.</p> <p>Discussions are still underway for updating eligible populations for both programs.</p>

Agency	Type	Activity	Where we are June 30, 2024
IHDA	Process	Support a new senior-level position to partner closely with state agency and community stakeholders to develop detailed analysis of housing needs for OPEH populations in IHDA publications	IHDA has hired the new senior-level position. IHDA will continue to participate with state agencies to further analyze housing needs across the state for OPEH populations and include in IHDA publications.
DCFS	Program	Work with housing authorities across the state to increase the number of housing authorities administering Family Unification Program (FUP) and Fostering Youth Independence (FYI) vouchers	The Housing Authorities of Chicago, Cook County, and Rock Island County each received funding for more vouchers, (68, 75, and 19 additional vouchers respectively). Champaign County and Peoria created a new FUP as they received 67 and 39 vouchers, respectively. The total value of the new vouchers is approximately \$3.25 million per year. HUD funds a total of 18 Illinois housing authorities that implement FUP. In FY25, three new housing authorities, DuPage, Joliet, and Winnebago, were awarded FYI vouchers.
HFS	Program	Continue to engage in active negotiations with the federal Center for Medicaid and Medicare Services (CMS) and Children's Health Insurance Program (CHIP) to cover housing support under 1115 waiver authority; Facilitate an interagency workgroup comprised of members from sister health and human service agencies as well as OPEH and the Lieutenant Governor's Office; Inform the development of operational protocols for the housing support benefit and monitor its launch to ensure effective implementation	In FY25, HFS' activities included: (1) receiving 1115 waiver approval from CMS inclusive of housing support services; (2) submitting and receiving approval from CMS for Illinois' Health-Related Social Needs (HRSN) implementation plan, and (3) meeting with sister agencies and human service agencies throughout FY25 to gather input into the HRSN operational protocols to launch services.
HFS	Program	Work with sister agencies and external stakeholders to engage and support new and existing housing support service providers entering the Medicaid ecosystem	In FY25, HFS convened a Housing and Services workgroup, comprised of sister agencies and community stakeholders to better understand the needs of housing providers and determine how to support them in becoming Medicaid providers. The plan is still in development.
IDHS	Program	Division of Developmental Disabilities Housing Navigator program moves from a pilot to an ongoing service within the contract for all Independent Service Coordination (ISC) agencies (7 in 11 regions); Illinois Council on Developmental Disabilities (ICDD) supports a housing consultant to work with Housing Navigation Services and create a manual, with work concluding in December 2025	In FY25, DDD has provided funding for 1 FTE in each of eleven regions plus an additional FTE in the Chicagoland ISC which serves the most individuals for a total of 12 FTE for Housing Navigators. Additionally, DDD has increased the reimbursement to be in line with the Qualified Intellectual Disability Professional (QIDP), funding providers to ISCs and service providers, ensuring competitive wages for this work. This grows the number of staff from seven to 12. ICDD continues to be a partner by offering technical assistance and funding a transition fund.

Agency	Type	Activity	Where we are June 30, 2024
IHDA	Program	Award \$15 million to support Healthcare and Housing Partnerships through IHDA's PSH Development Program	Funding awards for PSH Development Program Round X were approved in April 2024 including the one-time funding source known as Healthy Housing Healthy Communities (H3C). This funding was made available to projects who demonstrated a strong partnership with a hospital, managed care organization, or federal and community health centers. All H3C funding was fully allocated to two developments who were approved for \$15 million in funding. Both projects will create 79 units designed to serve individuals and families experiencing chronic homelessness and/or who are medically fragile.
IHDA	Program	Implement the PSH Scoring Track in the competitive 9% Low Income Housing Tax Credit round to support the creation of additional PSH and homeless-targeted units	IHDA's 2024 9% LIHTC round awards were approved in July 2024, and 2025 9% LIHTC round awards were approved in June 2025. In FY25, IHDA approved three developments under the PSH Scoring Track, which included one joint 9% and 4% transaction. These projects include a total of 177 units with 158 dedicated PSH units.
IHDA	Program	Promote activities to increase Statewide Referral Network participation by 1) requiring units created with 9% Tax Credits to have a 10% set aside for the SRN in all geographies other than IHDA's Non-Metro Set-Aside (5%) and 2) including point incentives and increased flexibility to promote SRN participation	<p>For FY25, the SRN participation requirement is still in effect as detailed in the 2024-2025 QAP which stipulates that all 9% Tax Credit properties in Chicago, Other Metro, and Metro Chicago have a 10% set aside for SRN units. Any projects who received 9% Tax Credits located in the Rural set-aside are required to have 5% due to demand constraints. Further scoring incentives are included to encourage additional SRN units above these minimums.</p> <p>IHDA's Board approved the 2026 LIHTC Qualified Allocation Plan on June 20, 2025. The SRN participation requirements were extended into the QAP for 2026 which will be in effect for 1 year. IHDA expects to return to its two-year cycle thereafter.</p>
IHDA	Program	Through partnership with CSH, deliver the Supportive Housing Development Institute for two additional rounds to increase new PSH development projects; Provide financial support through a Project Initiation Loan Pool; Point incentives for Supportive Housing Institute participation have been included in IHDA's QAP and PSH Development Program RFA	IHDA approved funding for CSH to carry out the Supportive Housing Institute Round 2 in November of 2023 for calendar years 2024-2025. In FY25, CSH held 10 training sessions from March through June. A total of 11 teams graduated from the Institute targeting potential sites in counties such as Lake, Sangamon, Winnebago, St. Clair, and Cook. To date, a total of 13 projects were approved for financing by IHDA. Future rounds of the Institute are planned.

## New Activities

Agency	Type	Activity	Where we are June 30, 2024
DCFS	Process	Increase the number of youths with lived experience who participate in meetings to plan and improve implementation of the Foster Youth to Independence Initiative; DCFS provides stipends to youth who attend meetings	In FY25, three youth with lived experience participated in meetings with local housing authorities to discuss administration of the Foster Youth to Independence Program.
ICJIA	Program	Focus on leveraging R3 (Restore, Reinvest, and Renew) funding to address the housing needs of individuals reentering their communities from the criminal justice system; Gather crucial insights to inform Notice of Funding Opportunities (NOFOs); Highlight the critical need for transitional housing and permanent supportive housing (PSH) for reentry	ICJIA incorporated explicit housing language in the R3 Cohort Three NOFO to prioritize transitional housing and PSH for reentry where applicable. In the development of the Cohort Three NOFO, ICJIA will maintain this focus, clarify allowable uses, and encourage partnerships to support units and services, drawing on task force and field feedback to shape the language. Housing activities were prioritized, but not all dollars were allocated to housing.
ICJIA	Program	Replicate the Returning Home Ohio program, providing permanent supportive housing to returning citizens	ICJIA assumed management of the RHO project in FY26. In FY25, Treatment Alternatives for Safe Communities (TASC) engaged a consultant for a four-month planning phase with IDOC, ICJIA, and IDHS to design the Returning Home Illinois permanent supportive housing pilot, now called Building Resilience, Independence, Determination, Growth, and Empowerment (B.R.I.D.G.E.) to Home. The pilot will serve people returning from prison to Central and Southern Illinois who have barriers to housing. The planning phase will produce a pilot model, the required organizational infrastructure, and commitments from service and housing provider partners.

Agency	Type	Activity	Where we are June 30, 2024
ICJIA	Program	Women Dignity of Choice (WDoC) Program	<p>The WDoC program continues to draw strong interest across partners and the community. In FY25, 23 women were served. More than 50 interest forms have been submitted through Illinois Action for Children, Cara Collective, Saint Leonard’s Ministry, Defy Ventures, IDOC, Hardin House, and others. Two women are on the waitlist to join upcoming cohorts. Twenty-two applications are under review for the November Employment Pathway start. Six applicants were ineligible due to age, incarceration history outside IDOC or CCH, or a preferred residence outside Chicago’s South and West Sides. Housing stability remains a cornerstone of reentry. Through the pilot program, twenty-two women have received housing navigation services, thirteen are receiving housing stipends, seventeen are stably housed.</p>
IDHS	Program	Implement the Scattered Site PSH Program	<p>In FY25, 1,079 new units were created under the Scattered Site PSH program.</p>
IDHS	Program	Administer the Preventing Homelessness for Returning Residents (PHRR) Pilot Program	<p>There are two pilot programs within the PHRR pilot: Dignity of Choice and B.R.I.D.G.E. to Home (see project spotlight on page 16). IDHS administered these programs in FY25. This role will shift to ICJIA in FY26.</p> <p>The Dignity of Choice Pilot Program aims to create career and life pathways for formerly incarcerated women returning to the South and West sides of Chicago. This pilot will serve as a proof of concept to inform the practice of providing preventative measures to women impacted by incarceration, highlighting that when provided with the right resources they are set up for success.</p> <p>Additionally, the Illinois Criminal Justice Information Authority (ICJIA), the Illinois Department of Corrections (IDOC), and the Illinois Department of Human Services (IDHS) are leading to the development of a PSH pilot called B.R.I.D.G.E. to Home serving individuals returning from prison to Central and Southern Illinois who have barriers to housing.</p>
IHDA	Policy	As a work group of the Illinois Affordable Housing Task Force, survey the housing policies that other states are implementing or considering to reduce racial disparities in housing and homelessness; Provide recommendations to the Governor’s Office for consideration	<p>The workgroup met and developed recommendations. Recommendations will be delivered in early FY26.</p>

# PROJECT SPOTLIGHT

ILLINOIS HOMELESSNESS RESPONSE COLLABORATIVE



**Illinois Homelessness  
Response Collaborative**

At the Home Illinois Summit in June 2025, the Illinois Office to Prevent and End Homelessness (OPEH) announced the Illinois Homelessness Response Collaborative (IHRC), a new effort to strengthen Illinois' homelessness crisis response system. IHRC is a collaborative bringing Illinois' Continuums of Care (CoCs) and OPEH together regularly.

CoC participation in the IHRC includes a CoC capacity building grant designed to increase system-level capacity to navigate the changing environment and capitalize on opportunities to make progress.

The vision of Home Illinois and the Office to Prevent and End Homelessness is an Illinois where no one lives on the street, in a shelter, or in overcrowded housing. The IHRC is building Illinois' capacity to make measurable and lasting progress towards this goal through a statewide network of partnerships.

Through technical assistance, investment, and increased partnership, the IHRC will make progress toward the following goals:

## **1. Building a Resilient, Coordinated Homeless Response System.**

The Illinois Homelessness Training and Technical Assistance Center, an OPEH grant operated by the Supportive Housing Providers Association, is offering several technical assistance opportunities to Collaborative members.

A new Veteran Community of Practice supports communities to end veteran homelessness with ongoing coaching and training on best practices. This group will build on the success of FY25's 100-day Challenge during which three CoCs improved their systems to quickly identify veterans experiencing homelessness and connect them with housing and needed supports.

Recognizing that the critical importance of the expertise of people with lived experience, two cohorts will provide training and one-on-one support for people with lived experience of homelessness or the criminal justice system who work in homeless services and for their managers. These Communities of Practice are designed for and by persons with lived experience and centered on creating a dynamic and collaborative space to build skills and develop tools needed to advance their careers.

Additionally, two waves of training and coaching to support additional staff capacity are planned. These will focus on quality improvement science and system change skills and will better equip communities to address system failures and design innovative solutions. Collectively, these efforts are investments in the systems and providers responding to homelessness across Illinois.

## 2. Demonstrating Outcomes: Invest in and Use Data

Faster, system-level data is critical to solving homelessness statewide. In IHRC's first year, participating CoCs will report monthly on how many people are experiencing homelessness, broken down by specific populations such as youth, veterans, and families. Communities will be supported through targeted technical assistance and coaching in working to improve their data. Community data will feed into a new state dashboard which will inform state policy and planning.



Figure 2: Pictured is a Veteran 100-Day Challenge Sustainability Workshop including OPEH team members, ReInstitute coaches, and representatives from Sangamon, DuPage and Whiteside Counties

## 3. Preventing Homelessness Before It Happens

The IHRC has a particular focus on homeless prevention, including coordination of shelter diversion, homelessness prevention, and eviction prevention funding and services. A new Community of Practice (CoP), available to all IHRC CoCs, provides monthly support to communities working to improve coordination and outcomes in homeless prevention. The CoP will use data and best practices to reduce inflow into homelessness.

Building on the success of past 100-Day Challenges in rural, veteran, and unsheltered homelessness, five communities will work with coaches in a 100-day challenge focused on prevention. These communities will share back to the larger community of practice to accelerate implementation of promising practices developed through the challenge.

## 4. Stabilizing and Sustaining Resources

Homeless service providers leverage resources from federal, state, and local governments along with philanthropic resources. These funding streams are carefully braided together to resource the system. The current context is full of funding and policy uncertainty which will have impacts that ripple through service providers and systems.

The IHRC is designed to strengthen connections among CoCs and between CoCs and the State. This network will solidify feedback loops and share critical information and practices to mitigate the potential harm to people experiencing homelessness.

# STRATEGY #2:

## BOLSTER THE SAFETY NET

Strengthening the systems that prevent people from entering the literal homeless system is a central focus of the Plan. State agencies work with community agencies to provide relevant services including supporting persons who are at risk of eviction, seeking homeless prevention assistance, providing temporary housing to persons leaving carceral systems, and supporting those in need of crisis shelter options. A key piece of this strategy is assessing the amounts of prevention, diversion, and shelter resources needed to meet community needs and working to scale programs to meet those needs.

### Existing Activities

Agency	Type	Activity	Where we are June 30, 2025
IDJJ	Policy	Amend the Juvenile Justice Court Act (750 ILCS 405) to enable IDJJ to pay for housing costs six months post release and/or beyond the youth's legal discharge from the department; Upon amendment completion, explore a pilot program to support 10 youth with rental assistance for six months post-release; Develop agency directives to support the initiative.	In FY25, when requested, housing was provided for youth for up to six months after discharge. Community Services Case management directive has been updated and is active to reflect this service. YOS Housing Supports have been up and active in servicing youth and families in need since late 2023 to date.
IDoA	Policy	Engage the Senior Housing Residents' Advisory Council to create a space and opportunity for senior Illinoisans to connect with each other, meet with IDPH and IDoA, share their ideas on how the State can improve the quality of life for its senior residents; Give senior Illinoisans the opportunity to share their findings and recommendations on targeted services and supports for seniors	The Council met on July 23, 2024, October 22, 2024, January 28, 2025, and April 22, 2025. The following 2025 goals were established: 1. The Council will continue to explore the following topics: Isolation Prevention; Keeping seniors in their homes; Ensuring seniors feel connected to their communities; Addressing gaps in services highlighted by the COVID-19 pandemic; Improving IDoA's outreach to seniors statewide; 2. The Council will continue to examine how IDoA works with Area Agencies on Aging, Community Organizations, and Sister Agencies to ensure the highest quality programs and services for Older Adults in Illinois. 3. Develop a stronger role related to legislation. 4. The Council will research and compile information regarding the following topics: Insurance fraud; Medication accessibility; Independent living facilities' security and records of visitors; 5. The Council will prepare its final report with recommendations to present to the Governor and General Assembly on or before the December 31, 2025 deadline.

Agency	Type	Activity	Where we are June 30, 2025
IBHE, ICCB, OPEH	Process	Engage with the Illinois Commission on Poverty Elimination and Economic Security, inclusive of the Housing Subcommittee, to align on strategy	This is ongoing collaboration. For example, OPEH and the Poverty Commission collaborated on the Stability Investment for Family Housing cash transfer project. Additionally, OPEH presented 3.12.25 to the Poverty Commission's Housing Subcommittee on the FY25-26 Home Illinois Plan, highlighting areas of alignment with the Poverty Commission.
IBHE, ICCB, ISBE	Process	Advocate for improved accessibility and affordability of on-campus housing, and for innovative practices to address the root causes of homelessness, including basic needs insecurity, though the use of End Student Housing Insecurity (ESHI) grants	In FY25, IBHE awarded 11 ESHI grants of up to \$200,000 each. For the first time, ESHI grants had a special focus on the McKinney-Vento student and foster youth population. Grantee institutions were allowed to utilize ESHI funding to pay for room and board fees for this population to facilitate a smooth transition from high school to college and to provide stability to a known at-risk population. Additionally, awardee institutions used the funding to address student homelessness and basic needs insecurity through activities such as student bridge programs, including a bridge program specifically for foster youth, rental and utility assistance, childcare assistance, and textbook and/or technology loaning programs.
ICCB, IDHS, OPEH	Process	Explore homelessness services course work and certification process for homeless housing and services workforce	<p>In FY25 and FY26, a work group of the CACH along with other community workforce leaders was facilitated through the TA Center by Afton Partners and Sandra Grace LLC. This workgroup identified opportunities to increase the strength and stability of the homeless services and housing workgroup. The workgroup developed a set of recommendations addressing these goals which can be found inside the 2025 CACH Recommendations to the ITF. The report can be found at: <a href="https://www.dhs.state.il.us/OneNetLibrary/27897/documents/Homelessness/25015-CACH-Report-v3e_remediated.pdf">https://www.dhs.state.il.us/OneNetLibrary/27897/documents/Homelessness/25015-CACH-Report-v3e_remediated.pdf</a></p> <p>In FY26 Afton Partners and Sandra Grace LLC are continuing research to support the recommendations and OPEH is looking for opportunities to advance them wherever possible. Opportunities to advance access to training for the workforce are included in the recommendations.</p>
IDJJ	Process	Advance homelessness diversion strategies by supporting youth transition plans that prioritize kinship and relationship development	<p>In FY25, IDJJ's Aftercare team began tracking fictive kin placements in progress and outcome data. This was done by amending the IDJJ 0158 Aftercare Progress Review or Final Discharge Report and Discharge Plan. Fields added included more detailed data about the type of discharge setting.</p> <p>Additionally, IDJJ's Family Engagement Manager led efforts to support fictive kin and supports across the agency. Transportation services were also provided for family and fictive kin to visit youth in custody.</p>

Agency	Type	Activity	Where we are June 30, 2025
IDOC	Process	Through contracted and non-contracted agencies, provide transitional housing upon mandatory supervised release from a correctional facility, including persons with a sex offense on their record	IDOC continued to reduce gate violations (that is, those that could not be released due to having no approved housing site) for individuals with registry requirements by increasing transitional housing placements for these individuals. In FY25, IDOC facilitated 1,144 transitional housing placements and 1,086 placements through the IDOC Intensive Community Reintegration Program.
IDOC, IDHS	Process	Identify and find appropriate placements for mandated supervised release for persons with Serious Mental Illnesses, non-adherence to medication regimens, and histories of violence; Partner on referrals to IDHS Housing for Recovery Program	In FY25, IDOC continued to reduce gate violations (that is, those that could not be released due to having no approved housing site) for individuals with serious mental illness through increased placements with the Housing is Recovery Program. IDOC and IDHS participated in monthly meetings to coordinate referrals and placement and work collaboratively with providers when referrals are made. At the end of FY25, 39% of enrollees in Housing is Recovery were referred from IDOC and county jails but only 20% were successfully housed permanently. In FY26, DBHR and IDOC will continue to collaborate with IDOC to secure adequate housing options for this population.

Agency	Type	Activity	Where we are June 30, 2025
IDOC	Process	Explore financial, housing, and services models for permanent supportive housing for persons at risk of correctional system recidivism	<p>In FY25, IDOC collaborated with TASC, ICJIA, IHDA, IDHS, and OPEH to evaluate and test supportive housing and service delivery models aimed at improving reentry outcomes and reducing recidivism among justice-involved individuals. These activities included:</p> <ul style="list-style-type: none"> <li>• <b>Model Review &amp; Feasibility Analysis:</b> IDOC reviewed national and Illinois-based supportive housing approaches—including master leasing, clustered models, and scattered-site placements—to assess alignment with state residency laws, zoning regulations, and service capacity.</li> <li>• <b>Cross-Agency Coordination:</b> IDOC worked with partner agencies to explore how funding streams (SRN/811, Medicaid 1115 Waiver, Reentry Subsidy Pilot) could be braided to create sustainable, scalable housing options.</li> <li>• <b>Pilot Design &amp; Planning - B.R.I.D.G.E. to Home (B2H):</b> In partnership with TASC, ICJIA, DBHR, and OPEH, IDOC advanced B2H—a statewide permanent supportive housing model evolving from the Returning Home Illinois pilot. B2H integrates housing navigation, tenancy supports, and landlord engagement. FY25 efforts focused on eligibility criteria, service workflows, and preparation for initial placements in FY26.</li> <li>• <b>Pilot Design &amp; Planning - Dignity of Choice Pilot Program:</b> In collaboration with ICJIA, DBHR, and OPEH, IDOC supported this gender-responsive pilot for women returning to Chicago’s South and West Sides. The initiative combines workforce development, job placement, subsidized housing, childcare, and wraparound supports such as mental health and financial literacy services. Aiming to serve 100 women over three years, it demonstrates how coordinated, flexible supports promote stability and family reunification.</li> <li>• <b>Stakeholder Engagement:</b> IDOC engaged CoCs, community providers, and individuals with lived experience to ensure program designs reflect participant choice, community context, and equity.</li> </ul> <p>Overall Outcome: FY25 activities advanced IDOC’s efforts to develop scalable, trauma-informed reentry housing models—anchored by the <i>B.R.I.D.G.E. to Home</i> and <i>Dignity of Choice</i> pilots—positioning the agency for implementation in FY26.</p>

Agency	Type	Activity	Where we are June 30, 2025
DCEO	Process	Pursue a policy change to waive medical cannabis registry card fee for people experiencing homelessness with a qualifying condition	The new Medical Cannabis Patient Registry platform has launched. Current efforts are centered on assessing how homelessness status is currently tracked across existing state systems and external programs serving individuals experiencing homelessness. This analysis will inform the Illinois Department of Public Health (IDPH) in the development of clear, consistent guidelines for homelessness verification, with the goal of reducing barriers to accessing this essential medical intervention.
DCEO	Program	Administer the Community Services Block Grant (CSBG), providing rental and mortgage assistance, motel vouchers, and shelter services	The CSBG program funded 35 Community Action Agencies and 3 Statewide Migrant Organizations, all of which utilized a portion of their total allocation for housing-related activities. The funds allocated for housing amounted to approximately 11.5% of their total expenditures.
DCFS	Program	Support the Youth Cash Assistance (YCA) program, providing assistance to youth aging or aged out of DCFS care, to stabilize housing situations; Funding supports rent, security deposits, utilities, landlord home repairs, beds, furniture, clothing, and household items.	In FY25, DCFS authorized \$294,000 to the Youth Cash Assistance Program, which supported 224 youth.
DCFS	Program	Provide Norman Cash Assistance funds to private agencies to purchase items for families at risk of having their children placed in foster care due to issues related to poverty, including homelessness; Funding supports rent, security deposits, utilities, landlord home repairs, beds, clothing, and household items; Provide training to workers and supervisors to increase utilization of Norman Cash Assistance	In FY25, DCFS authorized \$6.3 million for 4,834 families who had children who were in danger of being placed in or could not be returned home from DCFS care.
DCFS	Program	Support the Youth Housing Advocacy Program, helping youth aging out or aged out of DCFS care locate adequate housing; Supportive service delivery continues until the youth reaches age 21, with an extension if housed with a federal subsidy; Provide training to workers and supervisors to increase utilization	In FY25, DCFS authorized \$1.8 million to serve 677 youth referred for services to help them obtain and maintain housing through the Youth Housing Advocacy Program.
DCFS	Program	Administer the Norman Services Program to assist families in danger of having children placed in foster care, or unable to return home, due to issues related to poverty, including homelessness; Provide training to workers and supervisors to increase utilization. Increase the number of providers to increase utilization	In FY25, DCFS paid private contract housing advocacy providers \$4,188,901 to serve 2,614 DCFS-involved families to help them obtain and maintain housing.

Agency	Type	Activity	Where we are June 30, 2025
IBHE, ICCB	Program	Continue supporting the work of homelessness liaisons on college campuses (known as HOUSE Liaisons) by maintaining and expanding the current administrative infrastructure necessary for the implementation of the Higher Education Housing and Opportunities Act (110 ILCS 131/1); Improve higher education institution staff knowledge of Higher Education Housing and Opportunities Act's tracking and data reporting requirements	<p>In FY25, IBHE reviewed and updated the HOUSE Liaison reporting form to improve data received by HOUSE Liaisons. In FY24, it was noted that one of the major findings from the first annual report on HOUSE Liaison activities was the lack of appropriate data collection and tracking of homeless students and youth in care at the institutional level. Throughout FY25, IBHE worked with institutions to increase their understanding of the data and tracking requirements under the law. These methods resulted in an increase in both the number of institutions completing the annual reporting and the number of homeless students and youth in care reported by institutions.</p> <p>Almost 100 institutions completed the annual reporting in FY25 (which covered activities from FY24). This was a 9% increase in institutions reporting from the previous year. For this reporting period, institutions reported over 1,471 homeless students at their institutions, which is an over 200% increase from what was reported the previous year. IBHE released the second annual report in May 2025:</p> <p><a href="https://www.ibhe.org/assets/files/Homeless-Liaisons/2025/FY24_Student_Homelessness_Report_Final_05192025.pdf">https://www.ibhe.org/assets/files/Homeless-Liaisons/2025/FY24_Student_Homelessness_Report_Final_05192025.pdf</a></p> <p>Additionally, in May 2025, IBHE presented the data and tracking requirements under the Higher Education Housing and Opportunities Act and an overview of activities reported at the annual HOUSE Liaison Summit.</p>
IBHE, ICCB, ISBE	Program	In collaboration with the Illinois State Board of Education, continue to facilitate a smooth transition between high school and college for homeless students and youth in care	In FY25, the End Student Housing Insecurity (ESHI) grants were revised to place increased focus on McKinney-Vento students and foster youth. As a result, many ESHI grantees built stronger relationships with area McKinney-Vento liaisons, including holding joint training sessions and attending college informational sessions geared toward students. Additionally, IBHE staff presented to high school counselors at a webinar on supporting homeless students on the path to college.
IBHE, ICCB, ISAC	Program	In collaboration with Illinois Student Assistance Commission (ISAC), increase awareness of the new Free Application for Federal Student Aid (FAFSA) provisions relating to homeless youth and youth in care	IBHE coordinated with ISAC to record an updated portion of the HOUSE Liaison annual training that covers financial aid including the FAFSA's new provisions relating to homeless students and youth in care. Additionally, ISAC gave a presentation at the HOUSE Liaison Summit on these changes.

Agency	Type	Activity	Where we are June 30, 2025
IDHS	Program	Administer the Division of Early Childhood Home Visiting for Homeless Families (HVHF) Demonstration Program which ensures home visiting is more responsive to the needs of homeless families, informs practice and policy change, and increases integration and alignment across homeless services and home visiting systems; Continue to test strategies and develop recommendations for state implementation to support families experiencing homelessness with home visiting and other services	Accomplishments for FY25 include an average of 61 unhoused families served each quarter (the duplicated total for the year is 242 families), 1357 home visits conducted and 22 home visitors trained in engaging families experiencing homelessness. Program staff gave a presentation to the Early Learning Council's Health and Home Visiting Committee. The program contractor obtained private funding to expand to a new location (also within the City of Chicago).
IDHS	Program	Under the Williams Consent Decree, implement the Front Door Diversion Program (FDDP) to evaluate and offer Medicaid eligible persons Community-Based services and supports prior to admission to a Specialized Mental Health Rehabilitation Facility (SMHRF); Housing assistance, provision of basic needs, and supportive/healthcare services provided to avoid admission into a SMHRF after experiencing a mental health crisis and to remain in a Community-Based Setting; Currently 145 units for transitional housing; Explore expansion of housing opportunities for FDDP Participants in the coming fiscal years	The FDDP continues to provide community-based services and supports, specifically housing assistance, provision of basic needs, and supportive behavioral and healthcare services to eligible individuals in lieu of a Specialized Mental Health Rehabilitation Facility (SMHRF) admission. In FY25, the program expanded and added three new providers to support program efforts in targeted counties, specifically Lake, Madison, and St. Clair County. With the additional providers coupled with existing providers housing expansion efforts, the program offered 164 temporary housing beds for those that require immediate housing placement upon diversion. As of June 2025, an additional ten beds were utilized for FDDP Participants that required a higher level of support through residential programs upon diversion. The program lost some transitional housing units in FY25 due to a variety of reasons such as lease expiration. IDHS anticipates continued temporary housing expansion efforts in FY26 which would bring online anywhere from 1-3 new housing units with multiple beds, particularly in regions that have higher levels of diversion to the community. In FY25, the program successfully housed over 225 FDDP Participants in permanent housing options.

Agency	Type	Activity	Where we are June 30, 2025
IDHS	Program	Administer Projects for Assistance in Transition from Homelessness (PATH) Program; Distribute PATH Provider manual; Facilitate access to trainings available through PATH Data Exchange, SAMHSA resources and monthly meetings with Program Administrator; Strengthen partnerships with housing providers by coordinating quarterly learning collaboratives	<p>The PATH Program continues to deliver services to the target catchment areas. IDHS successfully applied and received federal funding for FY26. In FY25, providers were able to enroll 582 out of the 1200 people that were engaged. The Chicago area PATH providers collaborate with Chicago Department of Family Support Services and their networks of street outreach teams to increase visibility and available resources to avoid duplication of services in any one area. The IDHS PATH coordinator is in the process of planning trainings for grantees for FY26.</p> <p>Current PATH grantees serve the following areas:</p> <ul style="list-style-type: none"> <li>• Chicago - Healthcare Alternative Systems, LSSI, Thresholds, Trilogy, Pilsen Wellness Center</li> <li>• Cicero, Berwyn, Melrose Park, Stone Park (Cook County) - H.A.S.,</li> <li>• Harwood Heights, Elmwood Park (Cook County) - LSSI</li> <li>• Peoria, Tazwell, Woodford, Fulton Counties - Phoenix Community Development</li> <li>• Sangamon County- Memorial Behavioral Health</li> <li>• Winnebago, Boone, DeKalb Counties - Rosecrance</li> <li>• Alexander, Hardin, Johnson, Massac, Pope, Pulaski, Union Counties - Arrowleaf</li> </ul>
IDHS	Program	Through the Emergency and Transitional Housing (ETH) Program, provide funding for community-based shelter and transitional housing for persons experiencing or at risk of homelessness, including emergency, overnight, motel or hotel-based shelter and transitional housing programs	In FY25, ETH served 37,009 people experiencing homelessness and provided 1,705,737 individual supportive services.
IDHS	Program	Centers for Independent Living will provide training and technical assistance to emergency and transitional housing providers on accessibility requirements for people with disabilities to increase site accessibility and site modifications	This program was not reappropriated. The work was completed in the previous reporting cycle.
IDHS	Program	Fund legal and outreach assistance to support households in eviction court to prevent homelessness	In FY25, the Court-Based Legal Assistance (CBLA) program served 11,850 individuals.
IDHS	Program	Administer the Emergency Solutions Grant (ESG)	In FY25, ESG served 24,491 individuals, including providing outreach services to 6,696 individuals and placing 1,819 individuals in housing through rapid rehousing services.
IDHS	Program	Administer the Homeless Prevention (HP) Program	In FY25, 8,682 households were served through the HP Program, including 6,559 households who received rental assistance and 1,417 who received utility assistance.
IDHS	Program	Administer the Triage Shelters Program	In FY25, 2,316 individuals were served in Triage Shelter.

Agency	Type	Activity	Where we are June 30, 2025
IDJJ	Program	Create a training module for facility and aftercare staff to identify housing resources and to begin the discharge and transition planning process earlier in the commitment process; Create a training module for youth on independent living and life skills	<p>In FY25, the Aftercare Transition Program was provided to youth prior to release, covering topics including self-care, money management and housing, relationships and communication, work and study, and interacting with law enforcement.</p> <p>The Aftercare Transition Program (ATP) is provided for all youth that will be released to community supervision. Aftercare, Day Reporting Staff, and Illinois Youth Center (IYC) programming staff have been trained in ATP. Youth receive the modules while in facilities; however, in instances where they do not, they receive the programming in the community. The program is currently being evaluated by a workgroup of both Aftercare and IYC programming staff for updates and additions to keep relevant to current needs and community climate.</p> <p>Current modules include:</p> <ul style="list-style-type: none"> <li>• Module 1 - Trauma,</li> <li>• Module 2 - Self Care and Daily Living,</li> <li>• Module 3 - Money Management and housing, relationships, and communication skills,</li> <li>• Module 4 - Work and Study Skills,</li> <li>• Module 5 - Rules of the Road and How to Interact with Law Enforcement, and</li> <li>• Module 6 - Aftercare Basics and Skills</li> </ul>
IDJJ	Program	Fund community-based Therapeutic Residential Programs, Transitional Living Programs (TLP), and Independent Living Programs (ILP) for youth in custody with IDJJ; Youth complete their sentence in community-based re-entry settings	IDJJ continues to maintain contracts and MOUs with a variety of residential, TLP, and ILP providers statewide. IDJJ's placement and resource unit continue efforts to build out housing options near youth's home communities, those that support our emerging adult population, and those that provide intensive substance use disorders treatment programming.
IDVA	Process	Promote and partner with the US Department of Veterans Affairs (VA) to educate and assist veterans in applying for VA care and benefits, inclusive of access to VA homeless housing programs such as HUD-Veteran Affairs Supportive Housing (VASH) and Supportive Services for Veteran Families (SSVF)	IDVA promotes sustainable support services through collaboration with state and local agencies, the U.S. Department of Veterans Affairs, and other partners. These services include VA healthcare, housing assistance, employment training and programs, and supportive services such as VASH, SSVF, and other homeless prevention initiatives—all of which help prevent a return to homelessness.
IDVA	Process	Foster collaboration with County Veterans Assistance Commissions that provide county resources such as rental assistance, utility assistance, food vouchers; Enhance engagement with Commissions through inclusion in mutual training and services activities and event support	IDVA has continued to meet regularly with County Veteran Assistance Commissions across Illinois and jointly participated in hundreds of local events and service activities. Additionally, VACs participated in IDVA's Annual Training Conference in April. IDVA also sent 10 Veteran Service Officers to cross-train with the County VACs by attending the Illinois Association of County Veterans Assistance Commission's annual training held in Peoria, IL.

Agency	Type	Activity	Where we are June 30, 2025
IDVA	Program	Strengthen and bring awareness to Prince Home, a housing program serving 15 veterans experiencing homelessness	The Prince Home, in Manteno, IL is a transitional housing program that supports up to 15 Veterans at a time who are experiencing housing instability, medical, and mental health challenges. In FY25, the Prince Home contributed to a coordinated, statewide effort to end Veteran homelessness through outreach, education, and strategic partnerships. Veterans at the Prince Home were connected with the tools and resources they need—such as their earned VA benefits—to support long-term stability and successful reintegration into civilian life.
IDVA	Program	Administer the Veterans Cash Grant Program, that supports agencies providing homeless services, employment and training programs	In FY25, the Veterans Cash Grant Program awarded \$423,000 in grants under the homelessness funding category. Additionally, in FY25, the following amounts were awarded in categories that can directly impact homelessness and housing outcomes: Behavioral Health - \$330,952, Employment Training - \$246,183, and Disability Benefits- \$200,000.
IHDA	Program	Continue the existing Housing for Justice Involved Individuals Program (HJIIP) to provide funding for acquisition, new construction, or rehabilitation for transitional, service-intensive housing	IHDA's Board approved awards for HJIIP in December 2024. A total of 22 projects with 174 beds were approved for a total funding amount of \$10.45 million. Projects are in the following counties: Cook, Kane, DuPage, Peoria, St. Clair, and Winnebago.
ISBE	Program	Administer federal McKinney-Vento Homeless Education funding, supporting local school districts in addressing the needs of students experiencing homelessness and housing instability; Services provided include tutoring, supplemental instruction, professional development for educators on the needs of homeless students, and before and after school programs	The McKinney-Vento Act is designed to address the challenges that homeless children and youth face enrolling, attending, and succeeding in school. Illinois is a regionally designated state that has established procedures to ensure that homeless children and youth are afforded the same opportunities to be successful learners as all other children and youth. The landscape for providing those opportunities is coordinated by ISBE's state coordinator for the education of homeless children and youth. The funding provides ISBE-sponsored professional development and technical assistance to Lead Area McKinney-Vento Liaisons and school staff on removing the barriers to homeless children and youth's education. Under McKinney-Vento, barriers (e.g., lack of immunizations and health records, birth certificates, school records, and other documents, residency documents required for non-homeless students, guardianship issues) must be removed and homeless children and youth must be immediately enrolled.

Agency	Type	Activity	Where we are June 30, 2025
ISBE	Program	Lead Area McKinney-Vento Liaisons facilitate access to homeless assistance trainings on a monthly basis to school districts, families and the larger community	The McKinney-Vento Act is designed to address the challenges that homeless children and youths face enrolling, attending, and succeeding in school. Illinois is a regionally designated state that has established procedures to ensure that homeless children and youth are afforded the same opportunities to be successful learners as all children and youth. The landscape for providing those opportunities is coordinated by the Illinois' state coordinator for the education of homeless children and youth. The funding provides ISBE-sponsored professional development and technical assistance to the LEA homeless liaisons and school staff on removing the barriers to homeless children and youth's education. The barriers (e.g., lack of immunizations and health records, birth certificates, school records, and other documents, residency documents required for non-homeless students, guardianship issues) must be removed and the homeless children and youth must be immediately enrolled.
ISBE	Program	Through 9/30/24 when program ends, administer the American Rescue Plan - Homeless Children and Youth Funds to support housing insecure students; Activities include increasing outreach and identification of students experiencing homelessness, hiring systems navigators to help families and youth access education and offering early childhood education services for young children experiencing homelessness. Districts have conducted needs assessment to determine how to best use the funds for their McKinney-Vento student needs	This activity was funded through ARPA funds which ended on 9/30/2024.
ISBE	Program	<p>Through 9/30/24 when program ends, administer funding from the Elementary and Secondary School Emergency Relive Fund II &amp; III Community Partnership Grants; Homeless students are prioritized for projects where schools work in partnership with local communities to assess and meet the immediate pandemic-related, or social emotional, and/or trauma needs identified.</p> <p>Part of the plan required for Community Partnership grantees requires that districts address how the following will be engaged in the process:</p> <ul style="list-style-type: none"> <li>• Student voice</li> <li>• Substance abuse prevention and treatment</li> <li>• Early childhood</li> <li>• LGBTQ populations</li> <li>• Homeless and youth in care</li> <li>• Marginalized communities</li> </ul>	This activity was funded through ARPA funds which ended on 9/30/2024.

## Expansion Activities

Agency	Type	Activity	Where we are June 30, 2025
ICJIA	Process	Continue to meet with community providers and justice-impacted individuals to identify the challenges and barriers with housing options that are conducive to PSH	ICJIA met with community providers and justice-impacted individuals to surface the primary challenges and barriers to housing that aligns with PSH. Early themes point to gaps in affordable unit availability, landlord willingness, and the need for stronger wraparound supports. These conversations are directly informing our approach to aligning PSH-conducive housing options with reentry needs. Meetings are occurring in FY25 and FY26 with regional think tanks, and the Illinois Reentry Council (IRC). These conversations are also informing the B.R.I.D.G.E. to Home and Women's Dignity of Choice pilot programs.
ICJIA, IDHS	Process	Lead the interagency workgroup of Reentry Stakeholders to understand opportunities and challenges related to reentry which includes housing	In FY25, ICJIA maintained a regular meeting cadence of this workgroup and is now moving into focused discussions on support services, inclusive of housing. Agencies are beginning to share program and funding information to explore what could be leveraged in the Regional Reentry Hubs, with IHDA helping to identify supportive and affordable housing options. These conversations are exploratory, and no decisions have been made yet.
IDHS	Process	Dialogue with targeted Independent Service Coordination agencies (ISCs) about additional specific outreach informing DDD services to Black communities, with a focus on Community Service Options, Suburban Access, Southern Illinois Case Coordination Services	In FY25, this activity was placed on hold as IDHS determined that due to capacity, the ISCs are not the best way to deliver this service. Instead, DDD is considering a Black Outreach NOFO similar to our Latino Outreach NOFO which was just released. IDHS will use the IL Council on Dev. Disabilities (ICDD) to develop the NOFO.
IDHS	Process	Implement the One System Initiative, uniting the New Arrival and Homeless Crisis Response system into a unified system of care	The One System Initiative was completed in FY25. The One System Initiative is a name for the process to integrate the systems supporting new arrivals and longer-term residents experiencing homelessness in the Chicago area. Through OSI, the Chicago shelter systems have merged to maximize access, equity, and efficiency. Accomplishments of OSI include increased shelter beds in Chicago, the opening of the Shelter Placement and Resource Center (SPARC), a new 24/7 physical access point for connection to shelter with 200 overflow beds, training to providers, and 31 Community Transition Investment Grants (CTIG) providing one-time funds to increase the organizational capacity of community-based providers that provide services or engage in homeless prevention activities across Illinois. These funds aim to build the capacity of the system to be able to move toward the community-developed goals described in the One System Initiative Phase 1 report.

Agency	Type	Activity	Where we are June 30, 2025
IDoA	Process	Engage in a comprehensive update of Administrative Rules governing both the Community Care Program (CCP) as well as Older Americans Act services to comply with new federal regulations; Updating the rules and modernizing programs specifically through the lens of meeting the needs of older adults experiencing or at risk of homelessness; Revise the assessment forms to ensure Care Coordination Units ( CCUs) incorporate an evidence-based and person-centered approach to allow for early identification and intervention for older adults at risk of or experiencing homelessness	In FY25, IDoA convened a workgroup of Area Agency on Aging (AAA) representatives to draft a comprehensive update to 89 Ill. Admin. Code 230 to comply with new federal Older Americans Act regulations. IDoA anticipates filing the rule package with Joint Committee on Administrative Rules (JCAR) in FY26.
IDoA	Process	Utilize results from CCU and AAA survey to understand where services exist and services gap for older adults experiencing homelessness; Continue engagement with CCUs and AAAs on advancing strategies to support older adults experiencing homelessness; Facilitate collaboration with OPEH by inclusion in upcoming events such as IDoA's Annual Conference which draws hundreds of statewide leaders throughout the Aging Network eager to effectuate lasting change	Based on a survey of AAAs and CCUs, IDoA and AAA established goals in the State Plan on Aging FY26-28 targeted to help with prevention of homelessness: Objective 1.8 Provide In-Home Services that address the unmet needs of older Illinoisans Strategies: 1 Home based services a. Provide chore housekeeping, home repair, and home preservation services. b. Expand chore lawncare services to include gutter cleaning, bush and tree trimming, and spring and fall clean-up.
DCEO	Program	Through Community Development Block Grant-Coronavirus (CDBG-CV) program, administer the non-congregate Rural Shelter program	In FY25, two rural communities received awards. Grants will be executed after environmental and special grant conditions.
DCEO	Program	Through the CDBG-CV program, administer the non-congregate Urban Shelter program	Twelve awards were made to Entitlement (urban) areas that DCEO does not normally serve. Grants will be executed after environmental and special grant conditions are met.
IDJJ	Program	Hire a Discharge Coordinator whose primary function is to support youth post discharge from Aftercare with housing and community supports.	At the end of FY25, the Discharge Coordinator position is pending. This this position is in progress, members of IDJJ's Resource unit are working to connect youth that will or have discharged with extension services and support, in addition to following up on progress and any other needs.
IDoA	Program	Prioritize the use of Emergency Senior Service Funds (ESS) for older adults at risk for homelessness, providing gap-filling assistance with minor home modifications, rent assistance, pest extermination, transportation to apply for housing, resources to assist with moving expenses, utilities, and other expenses vital to assisting individuals successfully transition from shelters to community	In FY25, IDoA revised CCU agreements to prioritize ESS funds for older adults at risk of or experiencing homelessness. Funding was provided for housing assistance, household repairs and minor modifications, and utility assistance.

Agency	Type	Activity	Where we are June 30, 2025
ICCB, IBHE	Program	<p>Maintain a regularly updated list of HOUSE Liaisons for each college and ensure this list is available and updated on the IBHE website; Maintain a listserv of HOUSE Liaisons, which is used to distribute information about professional development opportunities and to provide resources to liaisons, as well as to provide a place for HOUSE Liaisons to collaborate with their colleagues; In partnership with the ICSPS, ICCB continues to maintain a virtual Community College HOUSE Liaison Resource Center to support liaisons through professional development, technical assistance, and resources; Also, in partnership with ICSPS, ICCB has contracted in 2024 with homelessness expert Patty Zuccarello, Principal Consultant with Zuccarello &amp; Associates, to conduct a needs assessment for HOUSE Liaisons, provide three webinars on serving and supporting students who are homeless, and compile resources to support HOUSE Liaisons that will be housed on the HOUSE Resource Center. Based on the needs assessment results, ICCB will continue to contract with Zuccarello &amp; Associates to provide targeted and intensive technical assistance to community colleges in 2025 and 2026.</p>	<p>In FY25, IBHE maintained both 4-year university and community college HOUSE Liaison lists on its website at <a href="https://www.ibhe.org/HOUSE_Liaisons.html">https://www.ibhe.org/HOUSE_Liaisons.html</a>.</p>
ICCB, IBHE	Program	<p>Revise and update the mandatory HOUSE Liaison training to help liaisons identify available and appropriate services and resources for students experiencing homelessness, understand the financial aid eligibility of homeless students, including eligibility as an independent student under the federal Higher Education Act of 1965, develop trauma informed approaches, and better understand the supports available to students with experience in the foster care system; Expand partnership with ICCB, IBHE and the Illinois Center for Specialized Professional Support (ICSPS) by planning a joint HOUSE Liaison Summit. This in-person opportunity for both university and community college HOUSE Liaisons to learn more about supporting students experiencing homelessness will be provided on an annual basis, dependent upon continued funding</p>	<p>In FY25, IBHE updated the annual HOUSE Liaison training in partnership with ICCB. In May 2025, IBHE in partnership with ICCB and ICSPS planned and hosted the third annual HOUSE Liaison Summit with two plenary sessions, a student panel, and 12 breakout sessions.</p> <p>Over 120 individuals involved in this work attended the day-long Summit. More information on the annual HOUSE Summit can be found here: <a href="https://www.ilequity.com/iccbhousecenter/house-summit">https://www.ilequity.com/iccbhousecenter/house-summit</a>.</p>

Agency	Type	Activity	Where we are June 30, 2025
ICCB	Program	The ICCB Research and Analytics Student Services teams review available research on the numbers of homeless students on campus and will continue to strategize on data collection related to students experiencing homelessness and the supports they receive on campus	ICCB collects data on the number of homeless students on campus as part of the regular data collection process. Additionally, ICCB collects data and other information regarding the support HOUSE Liaisons provide on individual campuses. In FY25, a survey of HOUSE Liaisons was operated between November 19, 2024 - December 31, 2024. A summary of the reports is available on the ICCB website. This survey collected both quantitative and qualitative data. The information gathered was used to gather promising practices around supporting students and to strategize how ICCB can continue to support institutions as they support students.
IDHS	Program	Administer services for underserved victims and support established statewide domestic violence network with short-term rent, utilities, transportation cards, basic needs; Administer funding that stabilizes workforce and enhanced comprehensive programming; Provide expanded training & technical assistance to meet needs of statewide victim services system with a focus on building capacity of agencies and enhancing service delivery	In FY25, \$69,493,240 was awarded to 65 comprehensive domestic violence programs that require provision of or referral to emergency shelter for survivors of domestic violence.
IDHS	Program	Develop and implement a plan to expand the capacity of the existing IDHS Homeless Youth grant program, serving youth 14 to 24 years of age who cannot return home and/or lack the housing and skills necessary to live independently.	In FY25, IDHS expanded services through 18 providers. The expansion added 295 units of beds or service capacity as follows: Outreach/Case management 171; Emergency Shelter 23 beds; Transitional Living 101 beds.
ISBE	Program	Work with school districts to make sure an appropriate amount of Title I funds are set aside for homeless students	This activity was funded through ARPA funds which ended on 9/30/2024.
ISP	Program	Develop, disseminate, and consolidate answers to a survey to be disseminated through the Illinois Association of Chiefs of Police to ascertain the resources needed by local law enforcement to implement the policies, training and practices recommended in the Illinois Response to Homelessness Guidebook developed under the previous plan	In FY25, ISP, OPEH, and the TA Center met with the Illinois Law Enforcement Training and Standards Board (ILETSB) to pursue training development for senior leaders of local police departments based off the Illinois Law Enforcement Response to Homelessness Guidebook. In addition, the ISP covers the training topics included in the Home Illinois plan through crisis intervention training (a 40-hour course mandated for all ISP sworn personnel).
ISP	Program	Focus on being aware of warning signs for human trafficking when engaging persons experiencing homelessness and assisting when shelters/other jurisdictions are looking to locate individuals who are at a high risk of human trafficking amongst the population of persons experiencing homelessness; continue teaching the curriculum developed to new cadets and recruits	In FY25, ISP, OPEH, and the TA Center met with the Illinois Law Enforcement Training and Standards Board (ILETSB) to pursue training development for senior leaders of local police departments based off the Illinois Law Enforcement Response to Homelessness Guidebook. In addition, the ISP covers the training topics included in the Home Illinois plan through crisis intervention training (a 40-hour course mandated for all ISP sworn personnel).

Agency	Type	Activity	Where we are June 30, 2025
ICJIA	Policy	Expand research to include an in-depth analysis of current HUD guidelines regarding fair housing, affordable housing initiatives, and housing opportunities for individuals with criminal activity in their background; Investigate the latest HUD guidelines and regulations concerning fair housing practices, inclusive of examining anti-discrimination policies, accessibility requirements, and efforts to promote inclusivity in housing; Research HUD programs and initiatives aimed at increasing access to affordable housing for low-income individuals and families, inclusive of reviewing existing subsidy programs, grants, and other financial assistance mechanisms; Explore HUD policies regarding housing opportunities for individuals with a history of criminal activity, inclusive of examining guidance on tenant screening procedures, housing discrimination laws related to criminal records, and supportive housing programs for reentry populations	In FY25, ICJIA refocused from a HUD-only lens to a broader investment strategy for affordable and supportive housing. ICJIA is leveraging existing tables: the Interagency Workgroup of Reentry Partners, regional think tanks, and city and county collaboratives to surface projects, braid funding, and align approvals.
ICJIA	Policy	Explore the intersection of palliative care and compassionate release within the veteran population, examining the accessibility and utilization of Veterans Affairs (VA) services. This research aims to identify the specific needs and barriers faced by veterans seeking palliative care or compassionate release, identify any overlap with the needs of individuals and the services the Veterans Affairs office can provide in relation to housing	ICJIA placed this item on hold as a stand-alone research agenda for FY25. We have integrated the veterans focus into the Regional Reentry Think Tanks to use existing forums, reduce duplication, and move faster from discussion to action.
IDHS	Policy	DBHR (now DBHR) provides training and technical assistance to grantees on implementation of harm reduction practices and low-barrier services to expand access for those currently using substances to crisis, transitional and permanent housing resources	DBHR continues to consult directly with providers/ grantees on overdose prevention activities and education on housing resources that are available in their areas.
IDHS, ISP	Policy	DBHR and ISP work with providers and partners to develop and coordinate housing related substance use disorder services to ensure that housing residents can access clinically appropriate treatment and recovery services	Many providers funded by the DBHR block grant continue to provide Community Intervention services, which include outreach and engagement activities to unhoused populations. Both DBHR and Medicaid in Illinois cover recovery support services that help enhance housing stability for people with substance use problems.

Agency	Type	Activity	Where we are June 30, 2025
IDVA	Program	Advance a statewide campaign to end veteran homelessness	<p>In FY25, with support from TA Center-contracted providers, three Illinois communities participated in a 100-day Challenge to focus their local systems capacity to quickly identify veterans experiencing homelessness and connect them with housing and needed supports. The Continuums of Care from Sangamon, DuPage and Whiteside Counties were engaged in this 100-day Challenge.</p> <p>Additionally, IDVA Director Prince presented to the Illinois Interagency Task Force on Homelessness at their December 12, 2024 meeting, along with partners from IHDA, Community Solutions and the Lovell Federal Healthcare Center. Director Prince shared context around veteran homelessness and IDVA's commitment to collaborating to end veteran homelessness. In FY26, this collaboration will grow into the Illinois Homelessness Response Collaborative, which will have a dedicated area of work around veteran homelessness.</p>

## New Activities

Agency	Type	Activity	Where we are June 30, 2025
DCFS	Process	Develop protocols to work with other Illinois Departments to assist youth who are aging out of care as a result of the Transitioning Youth Intergovernmental agreement; Work with liaisons from the Department of Human Services, Health and Family Services, Department of Juvenile Justice as well as other Departments before the youth ages out of care to decrease the likelihood they become homeless after leaving the care of DCFS	DCFS is setting up a mechanism for these agencies to support youth as they age out of care. An IGA has been signed by all participating state agencies, and interagency meetings will be scheduled beginning in January 2026, after members are identified by each agency. A specific goal of the group is to ensure coordination of, and access to, supports and services for transitioning youth, especially housing supports.
DCFS	Process	In response to Black Homelessness in Illinois: Structural Drivers of Inequality, assist more youth to apply for and obtain unemployment insurance compensation	In FY25, DCFS provided training to housing advocates on helping youth obtain unemployment benefits.
DCFS	Process	In response to Black Homelessness in Illinois: Structural Drivers of Inequality, launch a pilot program to support the housing and mentorship needs of youth transitioning out of DCFS care. Evaluate the impact of the program on housing stability	DCFS is part of Illinois' YHSI Grant. In partnership with OPEH and The Night Ministry, four to six youth interns will work at DCFS in calendar year 2026.

Agency	Type	Activity	Where we are June 30, 2025
IDHS	Process	Division of Developmental Disabilities creates materials and training to share with supportive housing and shelter groups on crisis and DDD services	In FY25, DDD completed an updated webinar/recorded training and PowerPoint for school districts to be sent out through ISBE, with basic information about DDD services and how to get on PUNS list to access them ( <a href="https://www.dhs.state.il.us/page.aspx?item=168741">https://www.dhs.state.il.us/page.aspx?item=168741</a> ). This was shared with ISBE and on the DDD website and through DDD Communications and ISC. DDD is working on developing additional basic 101 information about DDD services to strategic partners. The webinar has been completed and shared. 101-type materials have been completed and translated into Spanish, Tagalog, Korean, Hindi, and Chinese and are available online.
IDHS	Process	Division of Early Childhood (DEC) ensures that programs across the division have an intentional focus on aligning with and supporting families experiencing homelessness	This work has been paused. The Division of Early Childhood will be transitioned to the Department of Early Childhood in FY27. Alignment work has moved to the new Department as part of the Transition and designing work.
IDHS	Process	Working in partnership with ISBE's McKinney-Vento liaison, DEC to align messaging and outreach efforts via the Child Care Resource and Referral (CCR&R), Child and Family Connections Offices (CFCs), All our Kids (AOK) Networks, and Birth to Five Councils	This work is ongoing. In FY26, IDHS-DEC plans to schedule a regular cadence of meetings with ISBE and DEC to create a plan for messaging and outreach, share the plan and updates with the CCR&Rs at their quarterly in-person meetings, and share the plan and updates with the CCR&Rs and AOK Networks through email.
IDHS	Process	DEC establishes data criteria to include services and supports for families experiencing homelessness, leading to the collection of both quantitative and qualitative data; Data and reporting will be reviewed quarterly	DEC collects homelessness data based on CCAP eligibility. There were 1,574 approved cases from in FY25 which marked the reason for childcare as Homelessness Protection Service. DEC is in the process of developing a plan to collect qualitative data from families to include services and supports that have been provided to them.
IDHS	Process	Division of Behavioral Health and Recovery convenes regional workgroups between Continuums of Care & shelter leadership and local Community Mental Health Centers (CMHC) to better understand how providers can support individuals with Serious Mental Health (SMI) in shelter settings	Work is planned on this to begin in first quarter FY26.
IDHS	Process	Office of Housing Stability assesses the feasibility and approach of updating IDHS homeless programs reporting portal to be consistent with HUD reporting requirements/HMIS data reporting	In FY25 IDHS contracted with the UI Health Institute of Healthcare Delivery Design on the development of a dashboard, focusing on ETH, RRH, Scattered Site PSH, and Homelessness Prevention. The dashboard was delivered in an internal prototype phase in FY25. In FY26, work will continue to assess reporting requirements and data collection mechanisms going forward.
IDHS	Program	Through the Division of Rehabilitation explore employment linkage and program opportunities for people experiencing homelessness and the employment services offered by the Division of Rehabilitation Services.	This project was not active in FY25.

Agency	Type	Activity	Where we are June 30, 2025
IDHS, OPEH	Process	Facilitate targeted training and support on best practices in the field for state staff who administer housing/homeless service programs	This was completed in FY25. CSH facilitated a nine-part training for Office to Prevent and End Homelessness and DHS Office of Housing Stability staff. Trainings included in-depth training on program models and best practices in homeless services and supportive housing.
IDoA	Process	Launch a tool kit for older adults and their caregivers both at risk for and experiencing homelessness; Provide information on the resources available in the immediate geographic location such as transportation, temporary housing/ rental assistance, nutrition, social connectedness, assistance enrolling in benefit programs, senior centers, assistive devices, and respite care; CCUs and AAAs share the toolkit with older adults and their caregivers and help connect them with programs and services	IDoA has added resources for older adults, families and caregivers to its website in preparation for launching a Caregiver Portal in 2027. IDoA is currently working to update the list of housing resources on its website and will develop a toolkit specific to housing.
IDoA	Process	Weave new strategies into the new State Plan on Aging, solidifying the commitment to ending homelessness for older adults; Collaborate with OPEH to ensure alignment and identification of meaningful and achievable goals in the development of a new multi-year State Plan on Aging	IDoA has drafted a new 3-year State Plan on Aging and is awaiting approval by the Administration for Community Living (ACL). The plan is designed to serve older adults with the greatest economic and social needs, including those experiencing housing instability.
IDoA	Process	Enhance data collection by adding "homeless" and "at risk of homelessness" to the Community Care Program (CCP) intake form, allowing Care Coordination Units to better respond to older adult housing stability	IDoA is working with IT developers to implement a new case management system for CCP. Through this process, IDoA will work to update intake and assessment forms to include housing-related questions.
IDoA	Process	Provide information to agencies working with older adults returning to their communities from carceral settings to ensure knowledge of services offered by IDoA	In FY25, IDoA's Older Adult Services Advisory Committee (OASAC) convened a Building the Bridge Subcommittee following a GOAL Project focused on assisting older adults leaving carceral settings. The Subcommittee convened several meetings and issued a series of recommendations that the Department is working to implement. In addition, IDoA outreach staff regularly participate in IDOC Re-Entry Summits and provide participants with information on all IDoA and Aging Network programs.
IDoA	Process	Collaborate with local municipalities, AAAs, housing developers and housing providers on identifying housing subsidies and vouchers to increase accessible, safe, healthy, affordable, and inclusive housing	IDoA is exploring housing strategies and supports via the Multi-Sector Plan for Aging planning process.

Agency	Type	Activity	Where we are June 30, 2025
IDoA	Process	Actively work with federal, state and local housing advocates to ensure older adults can secure accessible, safe, healthy, affordable, and inclusive housing that allows for aging in place and community integration with supports; IDoA and other Aging network representatives to participate in statewide working groups for progress development on the Illinois Housing Blueprint goals; Inform policymakers about the gaps in services and make recommendations for reducing gaps in housing with supportive services for older adults	In FY25, it was established that one goal area of the Multi-Sector Plan for Aging will be “Livable and Connected Communities” which will include housing-related strategies. The Plan will be finalized by 12/31/25.
IDOC	Process	Explore the expansion of recovery home beds through partnership with IDHS which could expand recovery homes services in central and southern Illinois for individuals leaving IDOC custody	Conversations are ongoing between IDOC and IDHS/ DBHR to explore opportunities for expanded recovery homes to serve this population. Expansion would require additional funding.
IDPH	Process	Explore the connections between the homeless service and supportive housing sector’s workforce needs and the public health workforce; Support the alignment between these sectors where feasible	An exploration is underway to assess how the Community Health Workers (CHW) workforce can be expanded to include homeless services organizations, such as shelters, drop-in centers, and outreach programs. This effort aims to better integrate CHWs into the homelessness response system by identifying opportunities for collaboration, training, and deployment within frontline service settings.
ICCB	Program	<p>Explore the possibility of providing a small number of grants directly to colleges to support the work of the HOUSE Liaisons to fund pilot programs to expand campus-level activities and increase collaboration with local resources; Gather additional information on individual campus needs prior to finalizing any plans for proposed project; Potential activities include:</p> <ul style="list-style-type: none"> <li>• Student outreach efforts, training for HOUSE Liaisons and other campus staff, and efforts to deepen collaboration across campus divisions, expand collaboration with local McKinney Vento Liaisons to help with the transition between high school and college</li> <li>• Support work with the college’s local Continuum of Care and other local resources including emergency shelters, domestic and sexual violence centers, and food pantries to help support students’ needs</li> </ul>	Using Illinois General Revenue Funds, ICCB provided grants to eleven Illinois community colleges in amounts ranging from \$2,831-\$25,000 in FY25. The total program funding was \$250,000. The grants supported the development of pilot programs to respond to the specific needs of students experiencing homelessness or housing insecurity. Based on local need, colleges implemented a range of initiatives including providing direct student assistance, developing MOUs with local organizations to provide emergency housing for students, and collaborating with McKinney-Vento liaisons to support students’ transitions from high school to college. In the first six months of the grant, colleges reported 184 students received direct, individualized support in addition to broader campus and community outreach to support students experiencing homelessness. These grants will continue through December 2025.

Agency	Type	Activity	Where we are June 30, 2025
IDHS, ISP	Program	Implement the Community Outreach and Recovery Support (CORS) program, funded through an Opioid Settlement Fund NOFO; CORS services are delivered by persons with lived experience and designed to provide connections to Substance Use Disorder (SUD) treatment, recovery and social determinants of health services for individuals with SUD experiencing housing insecurity	<p>Fourteen organizations across Illinois deliver CORS services to individuals with Opioid Use Disorder (OUD) and other SUDs who are experiencing homelessness or housing instability and at risk of overdose, medical complications, and incarceration. They also establish pathways for peer workforce expansion. These organizations are based in Chicago, Belvidere, Charleston, Springfield, Caseyville, Peoria, Round Lake, LaSalle, Addison, and Eldorado. In collaboration with community partners, peer support workers (PSWs), and persons with lived experience (PWLEs), CORS connects individuals to recovery coaching and resources, treatment, housing, and other supports.</p> <p>In quarter one, training and technical assistance sessions and supporting materials for the required needs assessment and equity and racial justice plans were implemented. Materials will continue to be developed as sub-awardee needs are identified.</p> <p>In quarter two, based on the initial feedback from CORS recipients about invoicing, a supporting documentation guide was created. If CORS recipients submit invoices that include incorrect information or do not include the required supporting documentation, the RCCA informs CORS of the corrections that are needed.</p> <p>A series of individual financial reporting technical assistance sessions were held. Most sessions were well attended by program leaders, finance members, and direct service staff.</p> <p>In quarters three and four, CORS teams conducted outreach and participated in a variety of activities to engage those in need of services. To facilitate this, subrecipients are establishing partnerships with Continuums of Care and other community providers, such as Recovery Oriented System of Care Councils, recovery community organizations, and Overdose Education and Naloxone Distribution programs.</p> <p>Additionally, subrecipients conducted outreach in the community and in coordination with other community organizations to identify members of the priority population. These activities include outreach to tent encampments and other public spaces and participation in community events.</p> <p>Subrecipients increased community awareness of services through marketing initiatives, including producing fliers, radio ads, and social media posts. Finally, subrecipients referred individuals to CORS services if they were already engaged in other services within the organization (e.g., an individual in a housing program may be referred for peer support).</p>
IDHS	Program	Advance strategies and pilot for shelter and street outreach for enrollment in state administered benefits: TANF, SNAP, Medicaid, AABD, Unemployment, Shelter Diversion	In FY25, Shelter Diversion enrolled 4,282 households.

Agency	Type	Activity	Where we are June 30, 2025
IDHS	Program	Support Rapid Rehousing programs to support target populations, including returning citizens	In FY25, Rapid Rehousing created 2,363 new RRH units.
IDHS	Program	Office of Firearm Violence Prevention creates a housing stability fund for the Peacekeepers Program, advancing violence prevention street outreach work by engaging young people living in neighborhoods at high risk for violence	<p>This fund was launched in FY25. Although implementation began later than anticipated due to grant processing timelines, a strong policy framework was established to support meaningful participant engagement and responsible fund distribution.</p> <p>A total of 136 returning citizens received rental or emergency housing assistance through the Peacekeepers housing stability fund. All participants were connected to ongoing job placement support. Of those enrolled in financial literacy programming, 132 successfully completed the course.</p>
IBHE, OPEH, Public Universities	Program	Convene meeting between IBHE, public university presidents, and OPEH to review and discuss the Home Illinois plan; Utilize IBHE's Communities of Practice (CoP) to educate and provide best practices to public universities' Benefits Navigators and HOUSE liaisons regarding student homelessness, the use of affordable on-campus or off-campus affordable housing and addressing basic needs insecurity	In FY25, IBHE's Communities of Practice held an information session on student mental health as a part of supporting students, including those experiencing basic needs insecurity. Additionally, several sessions at the 2025 HOUSE Liaison Summit were dedicated to affordable housing and basic needs insecurity.
IDHS	Program	Division of Behavioral Health and Recovery Successful Transition programs offers wraparound supports to patients who discharge from hospitals in need of support; Piloting in FY25 with Madden and Packard Mental Health Centers	Two grantees enrolled a total of 136 participants at Madden and Packard Mental Health Centers. 108 of those enrolled received post discharge support from the grantees and 70 of those enrolled in services with a community mental health provider. Only six of those enrolled in Successful Transitions were re-hospitalized.
IDHS	Program	Provide outreach and education services to Black communities on how to access services for persons with intellectual and development disabilities	This is anticipated to be pursued in FY26 through an IGA with the Illinois Council on Developmental Disabilities (ICDD). ICDD will facilitate outreach and education to the Black community on how to access Home and Community Based Services and other state and federal support services for people with Intellectual and Developmental Disabilities.
IDHS	Program	Division of Mental Health builds community partnerships with local businesses and faith-based organizations to share resources in their respective communities through the Cultural Empowerment Program, with a particular focus on linking individuals to housing supports when necessary	FY25 was the first year of this program and included planning, hiring, and staff training. Grant agreements for two providers were executed in December 2024. Training and support were provided to 243 faith-based leaders and 886 community members. Over 30 of these community members were linked to additional mental health services and/or referrals following training.
IDHS	Program	Create community engagement and communications campaign to engage landlords to rent to unhoused households	In FY25, 345 individuals were served through this program.

Agency	Type	Activity	Where we are June 30, 2025
ISBE	Program	In an effort to ensure that schools are identifying homeless students, work with community partners to develop a metric by which to identify districts at risk of under-identifying homeless students	The McKinney-Vento Act is designed to address the challenges that homeless children and youths face enrolling, attending, and succeeding in school. Illinois is a regionally designated state that has established procedures to ensure that homeless children and youth are afforded the same opportunities to be successful learners as all children and youth. The landscape for providing those opportunities is coordinated by the Illinois' state coordinator for the education of homeless children and youth. The funding provides ISBE-sponsored professional development and technical assistance to the LEA homeless liaisons and school staff on removing the barriers to homeless children and youth's education. The barriers (e.g., lack of immunizations and health records, birth certificates, school records, and other documents, residency documents required for non-homeless students, guardianship issues) must be removed and the homeless children and youth must be immediately enrolled.

# PROJECT SPOTLIGHT

ILLINOIS DEPARTMENT OF COMMERCE AND ECONOMIC OPPORTUNITY  
HOME ILLINOIS WORKFORCE PILOT GRANTS

In FY25, the Illinois Department of Commerce and Economic Opportunity (DCEO) awarded four Home Illinois Workforce Pilot grants through Illinois Job Training and Economic Development Program (JTED) funding, in partnership with OPEH. Grants were awarded to:

- Embarras River Basin Agency (ERBA), working in collaboration with the Illinois Valley Economic Development Corporation, CEFS Economic Opportunity Corporation, SWAN, The Haven, Hope of East Central Illinois, LWIA 23 Lake Land College, LWIA 21 West Central Development Council to serve Clark, Clay, Coles, Crawford, Cumberland, Edgar, Effingham, Greene, and Fayette counties;
- All Chicago, working in collaboration with the Chicago Cook Workforce Partnership to serve Chicago;
- Alliance to End Homelessness in Suburban Cook County, working in collaboration with the Chicago Cook Workforce Partnership to serve suburban Cook County;
- United Workforce Development Board Inc. (also called Career Link or LWIA 15), working in collaboration with the Home for All Continuum of Care, and Phoenix Community Development Services (Phoenix CDS) to serve Fulton, Peoria, Tazewell, and Woodford counties in the LWIA 15 service area.

Grantees received a combined \$5 million across the four awards. These grants are an extension of the JTED, which was created to provide workforce training and wrap-around services to bolster equitable workforce recovery for Illinoisans struggling to gain meaningful employment because of the COVID-19 pandemic. The grants foster collaborations between Continuums of Care and Local Workforce Area (LWIA) lead agencies, thereby funding a variety of direct workforce services to people experiencing homelessness and testing systems-level coordination of the homeless response and workforce systems. The grants seek to enhance employment opportunities, improving individuals' financial stability and ability to afford permanent housing in their communities. Grants run from 10/1/2024 through 9/30/2026, including an initial nine-month planning period.

Grantees also participate in a community of practice facilitated by The Intersect, supported through the TA Center. The community of practice fosters cohesion and collaboration among grantees, sharing of practices and learnings, alignment of program design and procedures where feasible, identification of strengths, challenges, and supplementary data collection opportunities, and documentation and dissemination of learnings from the pilot projects and other focus areas as identified by the community of practice members.

Based in Peoria and serving the surrounding community, the LWIA 15 Home Illinois Workforce Pilot program, operated primarily by Phoenix CDS in partnership with Career Link, is a comprehensive initiative aimed at providing people experiencing homelessness with the tools and support they

need to secure stable employment and achieve self-sufficiency. This grant builds on Phoenix CDS's existing workforce and homeless services programming, increasing capacity through new staff workforce support roles including a Job Coach, flexible barrier reduction funding to address client needs, a computer lab, and events including onsite job fairs. The program coordinates employment opportunities for local employers and participants facing multiple employment barriers including housing instability and multiple disabling conditions. Through a combination of career services, skills assessment, job placement assistance, career counseling, support services, occupational training, work-based learning opportunities, and barrier reduction services, the program seeks to empower participants in navigating obstacles to employment and gaining the necessary skills and experience to thrive in the workforce.



One program participant described how participating in the Home Illinois Workforce Pilot program through Phoenix CDS has played a pivotal role in preparing them for both employment and personal growth. The participant highlighted improvements in money management, noting that as their income increased, they learned to plan and budget effectively. The program also strengthened their teamwork and collaboration skills, teaching them how to work well on projects and handle conflict smoothly. The participant emphasized their commitment to continuous self-improvement, both mentally and physically, and noted that developing strong communication skills and building rapport with team members has enhanced their professional support system. They also shared a renewed sense of responsibility and initiative, understanding that even small contributions help achieve larger goals. Reflecting on personal milestones, they said, *"1 year ago, I had my license revoked. Today I have a working car, title, and can drive to and from work."* The participant is pictured at left celebrating their achievement in their vehicle.

This participant is set to graduate from an educational program with a focus in Industrial Technology in May 2026 and feels that the problem-solving, task management, and safety skills gained through Phoenix CDS's Home Illinois Workforce Pilot will directly support their success in the field and opportunities for advancement. The program has helped them set goals, maintain motivation, and prepare for meaningful work in their chosen industry.

# STRATEGY #3:

## SECURE FINANCIAL STABILITY

To end housing instability, a combination of increased income and affordable housing is needed. The following activities promote pathways for economic stability.

### Existing Activities

Agency	Type	Activity	Where we are June 30, 2025
IDES	Process	<p>Within Title III of the federal Workforce Innovation and Opportunity Act (WIOA) Employment Services Program, collaborate with workforce system partners to improve referrals to individualized career services, training, education, and support service strategies for people experiencing housing instability and homelessness through</p> <ul style="list-style-type: none"> <li>• Illinois Workforce Innovation Board (IWIB) referral policy work group to set a state policy on effective referrals for workforce partners</li> <li>• Illinois Commission on Poverty Elimination and Economic Security work group recommendation on expanding barrier reduction funding/ support services</li> <li>• Support DCEO Workforce Pilot to apply future lessons to workforce system service delivery</li> </ul>	<p>The WIOA partners Referral Work Group completed its work at the end of FY25 and its responsibility was transferred to the IWIB Professional development committee. IDES was an active participant in the referral work group which developed the Referral Resource Guide that is now accessible through the IL WorkNet portal. The guide is a tool for frontline workforce system staff to use to improve quality referrals. Dissemination of the guide was done at the 2025 IL Workforce Summit, a Workforce Wednesday Webinar, and IDES presented it internally to over 140 IDES staff in local offices. IDES also supported the DCEO Workforce Pilot, including attending a technical assistance group meeting with grantees to discuss how data linkages between HMIS and local workforce partners can improve local coordination across systems. IDES continued to serve on the Illinois Commission on Poverty Elimination and Economic Security work group.</p>

Agency	Type	Activity	Where we are June 30, 2025
IDES	Process	<p>Improve employment related information about persons experiencing homelessness by augmenting survey data in the Coleridge Initiative Administrative Data Research Facility (ARDF) Unemployment to Reemployment portal; Match administrative records between unemployment insurance records and the Homeless Management Information System to understand employment stability and industry unemployment (length of time, take up of employment benefits) demographic characteristics, housing and employment program services access</p>	<p>Significant progress was made in FY25 in this area: project measures were finalized in coordination with All Chicago, IEL and NORC at the University of Chicago; research questions for pilot linkage and analysis were developed with input from project partners and the Chicago CoC's Employment and Income Task Force; Initial data linkage and analysis was completed in the ADRF; final analysis will be completed when one additional data set is linked; project partners will review final analysis to share with OPEH. The additional data source (Title III services) was identified, data was transferred to the ADRF, and analysts are cleaning the data for linking.</p>
IDES, OPEH	Process	<p>Advance interagency collaboration, external data partners, and HMIS data owners to strengthen state-level use of HMIS data for statewide analyses</p>	<p>IDES, All Chicago, IEL, and NORC met regularly over the year to come to agreement on recommendations for standard measures of homelessness for use in research projects that use HMIS data. The group's work and recommendations were included in a memo from All Chicago to OPEH, Memorandum on Measurement of Homelessness in Illinois State-Sponsored Research.</p>

Agency	Type	Activity	Where we are June 30, 2025
IDES	Process	Implement IDES Unemployment Insurance (UI) Equity Grant activities: <ul style="list-style-type: none"> <li>• IDES UI Advocates ensure that housing/homelessness organizations receive IDES materials, with priority on organizations in Continuum of Care with the highest disparities between Black and White homelessness</li> <li>• Improve the UI application process through mobile-friendly functionality, use of plain-language, and removal of other administrative barriers</li> <li>• Explore opportunities to include feedback from housing insecure individuals</li> </ul>	IDES Equity Grant activities and UI Advocate work continued through most of FY25. Adjustments had to be made to Equity Grant activities due to changes from the federal administration, but analysis of UI customer surveys by external researchers resulted in important information for the IDES UI program management team to use in future improvements. UI Advocates shared materials with community organizations and kept a resource list up to date with housing information during the year. Their work concluded at the end of FY25.
DCEO	Program	Implement Home Illinois Workforce Pilot Program, supporting Workforce Innovation and Opportunity Act (WIOA) administrative entities and CoCs to collaborate to support employment and training opportunities for people experiencing homelessness; Advance learning collaborative for grantee agencies; Create evaluation component to assist with determining how to scale this effort statewide	Four grants were established to support the Home Illinois Pilot Program grantees consisting of Embarras River Basin Agency (ERBA), All Chicago, the Alliance to End Homelessness in Suburban Cook County, and the United Workforce Development Board Inc. The grant term is from 10/1/2024 - 9/30/2026. Grantees planning portion of the grant was until June 2025 at which time they had to submit their program implementation plan and begin services. To date, 51 individuals have been enrolled across grantees.
DCFS	Program	Develop a Cash Transfer Program for youth aging out of DCFS Care	In FY25, DCFS and OPEH met to develop the preliminary framework for a cash transfer program which will continue to be built in FY26.

Agency	Type	Activity	Where we are June 30, 2025
ICCB	Program	Continue work with the Illinois Center for Specialized Professional Support (ICSPS) to provide technical assistance to community colleges providing support to students experiencing homelessness as part of administering the Strengthening Career and Technical Education for the 21st Century, as well as in support of the HOUSE Liaisons	<p>In FY25, ICCB completed the following activities related to implementation of this commitment:</p> <ol style="list-style-type: none"> <li>1) Provided information and technical support to community colleges on the Public-Act 102-0083 requirement for a designated homeless liaison on campus as well as an overview of the role of homeless liaisons to all community colleges and required reporting.</li> <li>2) Maintained a regularly updated list of HOUSE Liaisons for each college and worked with IBHE to ensure this list is available and updated on the IBHE website.</li> <li>3) Distributed information about professional development opportunities and provided resources to liaisons via the HOUSE listserv. Provided a communication vehicle for HOUSE Liaisons to collaborate with their colleagues.</li> <li>4) Worked with IBHE to maintain or update annual HOUSE Liaison training as needed. This training helps liaisons identify available and appropriate services and resources for students experiencing homelessness, understand the financial aid eligibility of homeless students, including eligibility as an independent student under the federal Higher Education Act of 1965, develop trauma-informed approaches, and better understand the supports available to students with experience in the foster care system. All HOUSE Liaisons were required to complete this training by Oct. 31, 2024.</li> <li>5) Expanded partnership with IBHE and the Illinois Center for Specialized Professional Support, ICSPS, including executing the annual HOUSE Liaison Summit in May 2025. This in-person opportunity for both university and community college HOUSE Liaisons to learn more about supporting students experiencing homelessness will be provided on an annual basis, dependent upon continued funding. ICCB staff, in collaboration with IBHE, presented findings from the annual HOUSE report at the HOUSE Summit.</li> <li>6) In partnership with the ICSPS, ICCB continued to maintain a virtual Community College HOUSE Liaison Resource Center to support liaisons through professional development, technical assistance, and resources.</li> <li>7) In partnership with ICSPS, ICCB worked with homelessness expert Patty Zuccarello, Principal Consultant with Zuccarello &amp; Associates, to support college grantees implementing their pilot programs, provide webinars on serving and supporting students who are homeless, and compile resources to support HOUSE Liaisons that will be housed on the HOUSE Resource Center. Zuccarello &amp; Associates presented webinar professional development for HOUSE Liaisons.</li> <li>8) With the Community College Technical Assistance funds, ICCB also supported NIU's work with consultants to investigate effective practices being implemented around the country aimed at attracting and retaining staff and generate recommendations for staffing approaches based on the findings of this process.</li> </ol>

Agency	Type	Activity	Where we are June 30, 2025
ICCB	Program	Support Community College Perkins Administrators in conducting the third iteration of the Comprehensive Local Needs Assessment (CLNA). This is a required component of Perkins law and is an equity-focused assessment of programs and program of study, including a strong data-disaggregation component, allowing colleges to do a deep dive of their data to determine specifically which student populations are underperforming in which programs; As students experiencing homelessness are a special populations subgroup under Perkins, colleges determine how best to assist students to ensure their success	All colleges completed and submitted the CLNAs by May 2024 (the end of FY24). In FY25, ICCB reviewed the CLNA submissions and identified some colleges that needed additional support to strengthen their CLNA process coming up for FY27. ICCB collaborated with Office of Community College Research and Leadership (OCCRL) to provide targeted technical assistance for the colleges we identified that needed additional support with the CLNA. OCCRL met with the invited participants in FY25 for a four-part series to provide this technical assistance. Topics included centering equity, utilizing data, and partnership engagement.
ICCB	Program	In partnership with ICSPS, complete a poverty simulation exercise	A poverty simulation exercise was not completed in FY25; however, planning for a FY26 poverty simulation took place. The FY26 poverty simulation will be held on October 30, 2025.

Agency	Type	Activity	Where we are June 30, 2025
IDES	Program	Continue to administer the federal Jobs for Veterans State Grant (JVSG) to work with veterans with significant barriers to employment, where housing instability or homelessness is considered a significant barrier to employment; JVSG staff partner with agencies that receive funding through the Homeless Veterans Reintegration Program that provides services to assist veterans to access meaningful employment and develop effective service delivery systems for homeless veterans	This is an ongoing activity of the IDES JVSG program; IDES staff work with these current grantees: America Works of IL (Cook, DuPage, Kane, Lake, Will, Kankakee); Of Color, Inc (Cook Co); and Transitional Living Services (Boone, Cook, Lake, McHenry, Winnebago).
IDHS	Program	Through the Office of Housing Stability, support training for homeless service providers in completion of the SSI/SSDI Outreach, Access and Recovery (SOAR) program to support individuals completing disability applications and successfully receiving benefits	In FY25, SOAR training was provided to 178 participants.
IDVA	Process	Promote services to educate and assist veterans in obtaining earned benefits through Veteran Service Officers (VSOs); VSOs aid completion of necessary forms and compile evidential documents needed to process benefit claims	IDVA currently has 54 Veteran Service Officers. In FY25, VSOs completed 311 Special Events (77% increase from FY24); 5,022 Fully Developed Claims (Rating ready without further development, 54% increase from FY24); 1,778 PACT Act Claims (45% increase); 17,862 claims overall all with 52,143 separate forms.
IDHS	Program	Continue the Access to Counsel program which provides legal aid services to households in eviction court	In FY25 Eviction Mitigation Access to Council program served 115,382 individuals through a partnership with IL Eviction Helpline.

Agency	Type	Activity	Where we are June 30, 2025
IHDA	Program	Continue the Court Based Rental Assistance Program with state funding, supporting households in eviction court	In FY25, the CBRA Program served 7,552 households.

## Expansion Activities

Agency	Type	Activity	Where we are June 30, 2025
IDHS, OPEH	Expansion	Implement the final phase of the Stability Investment for Family Housing cash transfer pilot, expanding access to families identified through McKinney-Vento liaisons; Develop IDHS capacity to distribute cash transfer payments	Administration of the third and final round of the Stability Investment for Family Housing (SIFH) cash transfer pilot was completed in FY25. In this round, funds were distributed to families through IDHS benefit cards, improving IDHS administrative capacity to operate similar projects in the future. IEL is continuing to study long-term outcomes across a variety of measures of wellbeing and economic and housing stability. Initial results are anticipated to be published in FY26.

## New Activities

Agency	Type	Activity	Where we are June 30, 2025
IDHS	Process	Office of Welcoming Centers for Immigrant and Refugee Services works with providers to develop an approved program design for the Immigrant Family Support Project, providing temporary emergency cash assistance to Illinois residents and families that may not be eligible for cash assistance given their immigration status; Illinois Welcoming Centers have the option to set aside 5% of their contractual budget dedicated to emergency assistance for individuals and families that are experiencing a crisis and are served by the provider	In FY25, the Immigrant Family Support Project (IFSP) was allocated \$10 million for an initial six-month period. However, the program was extended for an additional month, bringing the total duration to seven months while maintaining the same level of funding. IFSP provided temporary emergency cash assistance to Illinois residents and families who may not qualify for traditional cash assistance. The program concluded on January 31, 2025. IWC emergency assistance funds supported 7,675 crisis intervention sessions provided by IWC partners in FY25.
IDHS	Program	At shelters, provide outreach and enrollment support for state administered benefits, such as Medicaid and the Supplemental Nutrition Assistance Program (SNAP)	This activity did not occur in FY25.

# RESEARCH SPOTLIGHT

## ILLINOIS HOMELESSNESS MORTALITY AND MORBIDITY 2017-2023 REPORT



Accessible, affordable, and reliable housing is a critical social determinant of health that affects communities around the world. In Illinois, homelessness and the lack of supportive resources can significantly hinder an individual's ability to access health care services, ultimately leading to poorer health outcomes. Due to be released in the Fall of 2025, the second Illinois Homelessness Mortality and Morbidity Report presents a comprehensive analysis of health outcomes among individuals experiencing homelessness in Illinois from 2017-2023. The report highlights alarmingly high mortality, primarily attributable to chronic health conditions, drug-related overdose, traumatic injury, and extreme weather exposure.

The prevalence of chronic age-related conditions remains disproportionately high within this population, as these conditions affect people experiencing homelessness 10 to 20 years earlier than the general population. The report also presents an analysis of hospital utilization, highlighting the chronic disease needs of people experiencing homelessness, from managing diabetes to accessing mental health services.

This report offers recommendations that emphasize the importance of improving data acquisition and provider engagement that could reduce preventable deaths and improve health outcomes. The report is a resource for stakeholders, including policymakers, service providers, and people with lived expertise committed to advancing strategies that address the complex health needs of the homeless population and foster sustainable solutions across the state.

### **Key Findings from the report:**

- **2,996 deaths** involving people experiencing homelessness (PEH) were identified in the Illinois statewide vital records.
- The average age at the time of death was almost **20 years younger** than the general Illinois population (**55.5 vs 74.2 years old**).
- A total of **1,824,004 hospital visits involving 75,145 PEH** were identified in the Illinois statewide hospital records for 2017-2023.

### **Healthcare Utilization and Related Outcomes**

- During the years a person had at least one visit coded for homelessness, they had an average of **6.8 ED visits and 2.4 admissions**. By comparison, during the years the same person had no visits coded for homelessness (and were therefore more likely to be housed than other years), they had an average of **1.6 ED visits and 0.4 admissions**.

## Geographic and Temporal Patterns

- Compared to the general Illinois population, PEH disproportionately died in **outdoor or in other informal settings**, such as abandoned buildings (**19.6% vs. 0.6%**), with **89 deaths occurring on public transportation**, most of which occurred on trains or in train stations.

## Health Issues and Related Outcomes

- The most common comorbidities noted for PEH hospital patients included **hypertension, chronic pulmonary disease, substance use disorders, psychoses, and depression**.
- There was almost three times the proportion of PEH murdered compared to the general population (**3.1% vs 1.1%**). Compared to all PEH deaths, PEH who were murdered were disproportionately **44 years or younger and non-Hispanic Black**.
- There were **29,483 hospital visits** to treat PEH for injuries caused by assaults.
- There were **56 suicides and 15,578 suicide attempts** involving PEH over seven years. The proportion of deaths attributed to suicide is marginally higher than the general population.
- **112 PEH** had cold exposure identified as a contributing cause of death with an additional **6,930 cold injuries** treated in the hospital setting. The findings demonstrate that a proportion of cold injuries occur at temperatures when many municipalities do not have expanded emergency shelter services for extreme cold weather (often available below 32°F).

The 2025 Report also showcases artwork from Red Line Service, an organization led by people with lived experience of homelessness, which forges social belonging and cultivates abundant collective care through the arts, the necessary preconditions for developing future advocates.

IDPH and UIC honor and celebrate the lives of those reflected in this report, a solemn reminder of all people's shared humanity and the enduring grace found within Illinois communities. Each individual represents a story, a presence that once filled the world with meaning and connection. As we remember them, we recognize the impact they had on those around them and the legacy they leave behind. May they rest in peace, forever cherished in our hearts and memories, because one person impacted by homelessness is too many.

# STRATEGY #4:

## CLOSING THE MORTALITY GAP

According to the *Illinois Homelessness Mortality and Morbidity Report 2017-2022*, people experiencing homelessness die on average 18 years earlier than the general population. This disparity is unjust and unacceptable. The activities below support improving health outcomes for persons experiencing homelessness.

### Existing Activities

Agency	Type	Activity	Where we are June 30, 2025
IDHS, ISP	Policy	DBHR to coordinate training and technical assistance to Illinois State Police and other law enforcement partners on Opioid Use Disorder (OUD), Medically Assisted Recovery (MAR) and recovery resources to support first responders in understanding the needs of persons with OUD and to make appropriate referrals to resources.	In FY25, DBHR provided training and technical assistance to 35 county jails through a Learning Collaborative aimed at providing MAR for persons involved in the criminal justice system. Participating counties learn to diagnose and treat OUD, and to date over 2,300 persons have initiated or continued MAR treatment in a Learning Collaborative jail.
IDHS	Program	Administer the Housing Navigator Emergency Room Pilot	In FY25, 108 participants were served through this program.

## Expansion Activities

Agency	Type	Activity	Where we are June 30, 2025
IDHS, HFS	Program	Support the expansion of the Illinois Medical Respite Capacity Building Initiative (IMRCBI), providing planning and implementation grants to organizations looking to create medical respite beds	In FY25, the IMRCBI continued to be funded by IDHS with Home Illinois funding. It was convened and administered by the Illinois Public Health Institute (IPHI) and partners included National Institute for Medical Respite Care (NIMRC), National Healthcare for the Homeless Council, High Ground Partners, MIMS Consulting, SAGE Health Strategy, HFS, and local medical respite providers and coalitions in communities across Illinois. In FY25, specific activities included: awarding and administration of 22 medical respite capacity building sub-awards and providing technical assistance to the awardees; operation of a statewide medical respite learning collaborative; operation of a Cook County-specific learning collaborative with four strategic system-building goals; informing the development of the Medicaid 1115 waiver including participation on the HFS technical workgroup; and a developing key communications messages, outreach strategies, and a Cook County network guide to promote medical respite in communities. Capacity building awards were administered along three tracks (planning, new implementation and continued implementation tracks). Awardees receive up to \$100,000, one-on-one technical assistance from NIMRC, and learning collaborative meetings. At the beginning of FY25, there were 11 statewide medical respite providers. At the end of the fiscal year, Illinois had 16 providers across the state.
IDPH	Program	Publish and build on a statewide population health report on persons experiencing homelessness in Illinois, inclusive of an examination of the causes of death and life expectancy disparities for people experiencing homelessness; The initial Illinois Homelessness Mortality and Morbidity Report, published by IDPH in partnership with the UIC School of Public Health; IDPH and partners will work to update and build on the initial Report with updated analysis; Collaborate with partners to identify and implement opportunities for improved data collection to understand the health of people experiencing homelessness	In FY25, IDPH continued partnership with the UIC Department of Public Health to develop Year Two of the Homelessness Mortality and Morbidity report. The report is currently being finalized, with the full report scheduled for release by Fall 2025. This forthcoming report will include recommendations aimed at enhancing data acquisition methods and strengthening provider engagement strategies.

## New Activities

Agency	Type	Activity	Where we are June 30, 2025
IDPH	Process	Integrate understanding of housing as a core social determinant of health affecting maternal and children's health into the Title V program and the Maternal Morbidity and Review Committee; IDPH Office of Women's Health and Family Services to collaborate with IDPH's OPEH Senior Policy Advisor (SPA) to identify and implement opportunities to expand Illinois families' access to affordable, safe, and healthy housing through policy recommendations, funding, or other avenues	The IDPH SPA was hired March 2025. Efforts are in progress to explore collaborative opportunities between pediatric and maternal housing-focused initiatives, with an emphasis on using data to strengthen advocacy and service delivery in maternal and child health. These efforts, along with related activities, aim to deepen understanding of how homelessness may contribute to maternal mortality and inform targeted prevention strategies.
IDPH	Policy	The Office of Health Promotion will work to increase access to naloxone, a life-saving medication which can reverse an opioid overdose, in Illinois shelters and similar settings through increased outreach and education to service providers	In FY25, 3,994 Naloxone kits were distributed across various regions of Illinois through a collaborative partnership with Center for Minority Health Services grantees. The distribution focused on high-need areas and was supported by outreach, education, and harm reduction services to ensure the kits reached individuals at greatest risk. In FY26, IDPH plans to fund an organization to provide technical assistance, capacity-building and training on harm reduction practices to service providers working with people experiencing homelessness within the state.
IDPH	Process	Seek to align the Health in All Policies (HiAP) Workgroup convened by IDPH and the University of Illinois Chicago, in compliance with State law, with the Home Illinois Plan; Utilize the Workgroup to organize State partners on activities which align with the Home Illinois vision and Plan	IDPH remains actively engaged with the HiAP Workgroup, where increasing access to safe and affordable housing has been identified as an area of focus. HiAP also acknowledges housing as a critical social determinant of health and supports ongoing efforts to highlight barriers to care and advance policies that promote housing stability, and health equity.
ISBE, IDHS	Program	In coordination with DBHR, develop a database of resources related to Opioid use prevention and intervention; Resources may be utilized by school districts to drive curriculum development; Advance training opportunities to school districts	In FY25, IDHS DBHR and Prevention First continued to support ISBE with the rollout of the Overdose Prevention Resource Guides developed in prior fiscal years. Resources can be found here: <a href="https://www.isbe.net/Pages/Substance-Use-Prevention-and-Recovery-Instruction-Resource-Guide.aspx">https://www.isbe.net/Pages/Substance-Use-Prevention-and-Recovery-Instruction-Resource-Guide.aspx</a> . DBHR also requested that Prevention First collaborate with DBHR and DMH to develop a resource guide: "Supporting Every Learner: A Guide to Inclusive and Restorative Practices in Upper Elementary Classrooms." This is still a work in progress, with the work expected to continue in early FY26. The guide will support teachers in identifying non-punitive strategies for handling student behavioral concerns.

## Acknowledgements

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<b>Illinois Department of Corrections</b>	Latoya Hughes, Jennifer Parrack, Angela Mecagni, Richard Rowe
<b>Illinois Department of Employment Security</b>	Ray Marchiori, Carrie Thomas
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<b>Illinois Office of Communications and Information</b>	Tony Sanguedolce, Trevor Ollech, Amanda Flatt
<b>Illinois Office to Prevent and End Homelessness</b>	Christine Haley, Colleen Mahoney, LaTonya Butts, Wang Lau, Kevin Roth, Anna Spreitzer
<b>State Board of Education</b>	Tony Sanders, Katherine Ulmer, Kimberly Clarke, Shawn Conley
<b>Illinois State Police</b>	Brendan Kelly, Declan Binninger, Kelly Walter, Mary Anderson, Elizabeth Leahy

### The Illinois Youth Homelessness Prevention Subcommittee

This section serves as the FY26 yearly update from the Youth Homelessness Prevention Subcommittee.

The Youth Homelessness Prevention Subcommittee was created under 15 ILCS 60/10 to drive the State's work to prevent homelessness among youth leaving State systems of care across agencies.

The Youth Homelessness Prevention Subcommittee (Subcommittee) met three times during this reporting period. The Subcommittee began meeting in 2023 and meets every other month. The Subcommittee is comprised of State agency leaders and community leaders, including youth with lived experience in systems of care and leaders of nonprofit serving youth.

The Illinois Office to Prevent and End Homelessness (OPEH) and Chapin Hall provide staffing support to the Subcommittee. The minutes from each meeting are uploaded on the website after they are approved by the Subcommittee members.

In June 2024, the Illinois Department of Human Services (IDHS), in partnership with the Youth Homelessness Prevention Subcommittee and other partners, was awarded the US Department of Housing and Urban Development's Youth Homelessness Systems Improvement (YHSI) grant. The grant was awarded in partnership with the University of Illinois Chicago – School of Public Health and The Night Ministry. The Subcommittee will serve as the Steering Committee to the project.

The grant will directly advance the work of the Subcommittee. This 30-month grant began its planning period in October 2024.

The State's \$1.3M award includes a data matching project among local Continuums of Care, the Illinois Department of Children & Family Services (DCFS), the Illinois Department of Juvenile Justice (IDJJ), Illinois Department of Corrections (IDOC), and IDHS to better understand Youth and Young Adults (YYA) experiences of homelessness after discharge from State systems of care.

The data matching project is being led by the research team at University of Illinois Chicago - School of Public Health working with Continuums of Care across the state, the Youth Action Group, DCFS, IDHS, IDJJ and IDOC. The goal is to help the State understand how youth interact with state systems of care and pathways from systems of care to homelessness. The project will:

- improve data use between DCFS, IDHS, and IDJJ by building infrastructure and piloting the use of a data consolidator that will integrate data from the different agencies.
- develop tailored services to match youth needs, track access and barriers to services, and evaluate program efficacy.

The YHSI grant also includes a youth development plan, amplifying the participation of YYA in State programming to reduce the incidence of homelessness by enhancing discharge planning and post-care support. Through the grant, the State created a Statewide Youth Advisory Group (YAG) and a youth internship program at DCFS and the OPEH.

The YAG has been established as of September 2025 and is led by the efforts of The Night Ministry. The YAG is representative of the entire state of Illinois and meet monthly as well as participate in the bimonthly YHPS meetings. By participating in the YHSP meetings, the YAG acts with the YHPS as the Steering Committee for the remainder of the grant. The Steering Committee will determine and guide the research and questions for the data portion of the grant.

The Internship Program will be an additional opportunity for members of the YAG to learn skills in a professional office setting. OPEH will host six interns over two cohorts, and DCFS will host four interns over two cohorts. The first cohort of the internship program is anticipated to start in January of 2026.

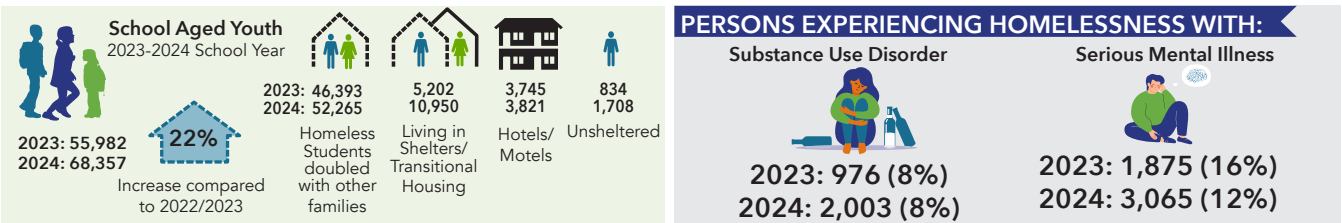
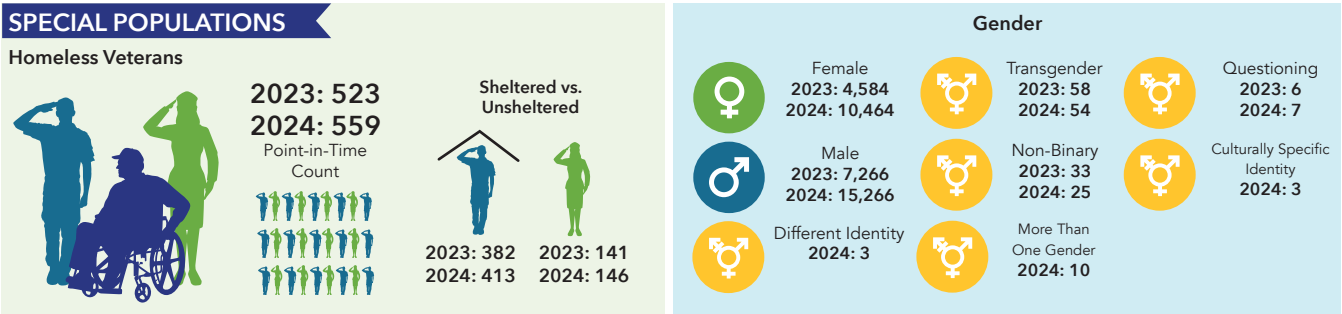
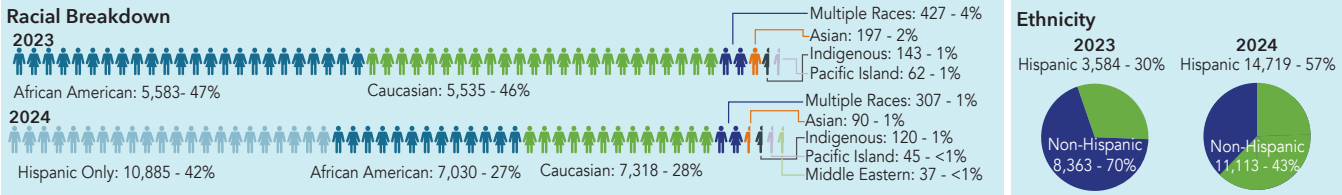
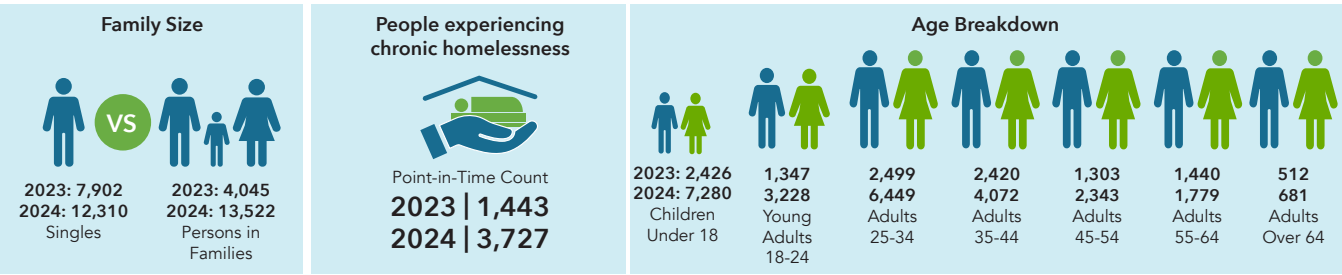
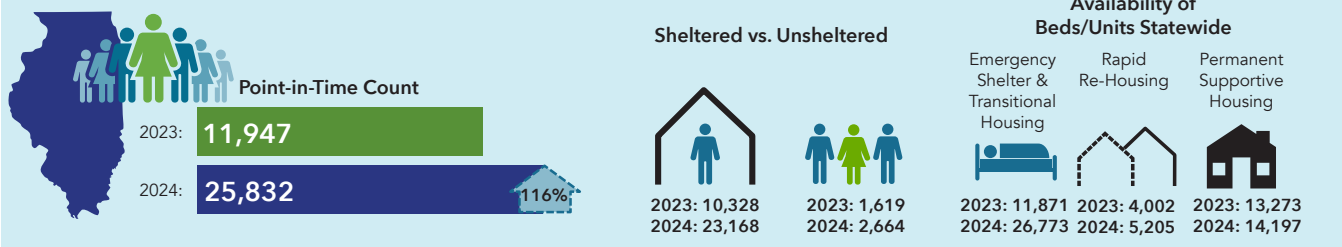
This report shall serve as the annual report submitted on behalf of the Subcommittee in compliance with reporting requirements outlined in IL Statute 15 ILCS 60/1, which indicates the Youth Homelessness Prevention Subcommittee shall submit an interim report to the Governor every 6 months and an annual report to the Governor and the General Assembly.

**Current members of the Subcommittee:**

- Tedd Peso, The Night Ministry, (Co-Chair)
- Nicholas Johnson, Youth Representative, (Co-Chair)
- Elizabeth Whitehorn, Department of Healthcare and Family Services
- Eugenia Olison, Department of Public Health
- Ashley Bae, Department of Human Services
- Jennifer Parrack, Department of Corrections
- Teresa Parks, Department of Guardianship and Advocacy Commission
- Michelle Martin, Department of Juvenile Justice
- Heidi Mueller, Department of Children and Family Services
- Isabella Hurtado, The Governor's Office
- Kalynn Lane, Youth Representative
- Ki'ani Diane Macklin, Youth Representative
- Sandy Godinez, The Harbour
- Ann Baker, Midwest Youth Services
- Valerie Tawrel, 360 Youth Services
- Leo'nard Johnson, Representative of a juvenile justice advocacy
- Niya Kelly, Representative of a homelessness advocacy organization
- VACANCY, Youth Representative

# PEOPLE EXPERIENCING HOMELESSNESS IN ILLINOIS 2023 AND 2024

## HUD POINT-IN-TIME (PIT) COUNT & HOUSING INVENTORY CHART DATA



OCTOBER 10, 2025

# Recommendations to the Illinois Interagency Task Force on Homelessness

Delivered by the Illinois Community Advisory Council on Homelessness



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**ACKNOWLEDGEMENTS:**

**Recommendation working group members:**

Angela Walker, Otha Gaston, Emily Kruscianas, Sherri Allen-Reeves, Tamela Milan-Alexander, April Redzic

**CACH Work Group Leaders:**

Sam Tuttle and Kim Drew (Improving Public Benefits Access Work Group); Jordan Enos (Illinois Medical Respite Capacity Building Initiative); and Ellen Johnson (Homeless Services Workforce Work Group)

**Report Design:** [Concentric Design](#)

**Workgroup facilitation and report writing:** Darci Flynn, Founder & CEO, [Brave Path Strategies, LLC](#)

# Meet the Illinois Community Advisory Council on Homelessness

## LIVED EXPERIENCE COUNCIL MEMBER SPOTLIGHT



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### *Tamela Milan-Alexander*

Tamela Milan-Alexander, MPPA, is the Director of Community Engagement at EverThrive Illinois. She has over 20 years of experience in maternal child health working as a peer educator, parent advocate, developmental screener and community health worker, as well as a Healthy Start case manager. Mrs. Milan-Alexander is an active advocate and collaborator to improve the lives of moms and babies, including current membership on the Illinois Task Force on Infant and Maternal Mortality Among African Americans and the Illinois Chapter of the American Academy of Pediatrics' Collaborative on Child Homelessness, in addition to the Community Advisory Council. In her career, she has seen that the perspectives of people with lived experiences are critical to enacting positive change and to ultimately supporting the health of Illinois' children.

Mrs. Milan-Alexander's drive for health equity and improving systems that care for families comes from her personal experience. In 1997, Mrs. Milan-Alexander's five children were in state welfare custody. She struggled with long-standing opioid use disorder and began another high-risk pregnancy. Mrs. Milan-Alexander was able to begin a new path with the needed encouragement of her infant daughter's pediatrician and the coordinated services of a Healthy Start program. Mrs. Milan-Alexander reunited her family, moved from public housing into a townhome and completed college and a master's degree. Her personal experiences have given her deep insight into the role neighborhood factors — such as access to housing, public transportation, food, childcare and education — play in shaping each of our lives. She urges the Interagency Task Force to partner with Public Housing Authorities and private housing providers to maximize not only families' access to housing, but also the choice and respect afforded to families in housing programs.

## LIVED EXPERIENCE COUNCIL MEMBER SPOTLIGHT



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### *Otha Gaston*

Otha Gaston has been an active advocate and collaborator to end homelessness in Illinois for the last eight years. In addition to serving on the Community Advisory Council, he holds a seat on the Chicago Continuum of Care (CoC) Lived Experience Commission and its Racial Equity Impact Team. He also serves on the Chicago and Cook County Flexible Housing Pool Advisory Committee and is a longtime member of the Supportive Housing Providers Association's Peer Leadership Committee. His passions for ending homelessness and restoring hope to people stem from his own past experience with homelessness.

Otha wants to help policymakers understand that housing is the solution to homelessness and that the work of funding homelessness is urgent. Otha says that people do not set out to become homeless and that people experiencing homelessness live lives as complex as anyone else's. He knows the value of programs to prevent homelessness, such as emergency rental assistance and increased access to legal representation in eviction courts and encourages the State to prioritize investing in these programs.



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### *Sherri Allen-Reeves*

#### **BACKGROUND:**

Sherri is the Executive Director of Phoenix Foundation, NFP (PHX-NFP). She has passionately worked in the service of others for over 30 years and is a vocal advocate for the homeless and other disenfranchised people. In her inaugural year as Executive Director, she generated over four million dollars in program revenue to support individuals experiencing housing insecurity. Under her leadership, PHX-NFP recently opened Phoenix Rising Emergency Triage Shelter, a 75-bed non-congregant shelter for single men and women, became an Access Point for the Coordinated Entry System, providing services for 38 units of Rapid Rehousing, and partnering with Centers for Housing and Health, providing case management for forty families in Permanent Supportive Housing.

Her service includes Board Member roles for the Chicago Continuum of Care, Supportive Housing Providers Association, Legal Council for Health Justice, and the Darren B. Easterling Center for Restorative Practices. She is also a member of the Collaborative on Child Homelessness Illinois Leadership Committee, Rotary Club Chicago Southeast, and the National Alliance to End Homelessness BIPOC Collective and Leadership Council.

#### **PARTNER WITH ME ON:**

Family homelessness, equitable service delivery, Continuum of Care, organizational leadership



## *John Herring*

### **BACKGROUND:**

Executive Director, Illinois Network of Centers for Independent Living

### **PARTNER WITH ME ON:**

The intersection of homelessness and disability

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## *Jennifer Hill*

### **BACKGROUND:**

Jennifer Hill is Executive Director of the Alliance to End Homelessness in Suburban Cook County, a membership organization which coordinates a continuum of services and housing options for people experiencing homelessness. Before joining the Alliance in 2004, Ms. Hill was previously the founding director of a statewide supportive housing coalition in Florida, where she contributed to the creation of Miami-Dade County's 10-year plan to end homelessness. She has worked for nonprofit community development groups in Uptown Chicago, San Francisco and Oakland, CA. Ms. Hill holds a masters degree in city planning from the University of California – Berkeley.

### **PARTNER WITH ME ON:**

Continuums of Care, Youth Homelessness Demonstration Program (YHDP), strategic planning and homelessness data

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## *Marlana Kalafut*

### **BACKGROUND:**

Marlana is the CDBG Program Manager at the Economic and Community Development Agency for the City of Kankakee, IL. Her work focuses on the development and implementation of programs and services that address the needs of Kankakee residents, especially those who are low- to moderate-income. In her role, she has worked to formalize increased collaboration and communication between the local government, local social service agencies, the Central Illinois Continuum, and other stakeholders to address homelessness in Kankakee and the wider area.

### **PARTNER WITH ME ON:**

Data-driven and systems-level change and coordination, grant administration, rural homelessness

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## *Niya Kelly*

### **BACKGROUND:**

Niya is the Director of State Legislative Policy, Transformation and Equity at the Chicago Coalition for the Homeless. Her work focuses on advocacy and organizing around the Illinois' budget, public benefits, youth homelessness and housing insecurity policies. She understands that homelessness is a direct result of racism and inequities in our country and incorporates her deep understanding of systemic racism in her work.

### **PARTNER WITH ME ON:**

Legislative advocacy, State budgeting, public benefits, racial equity and youth homelessness



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## *Emily Krisciunas*

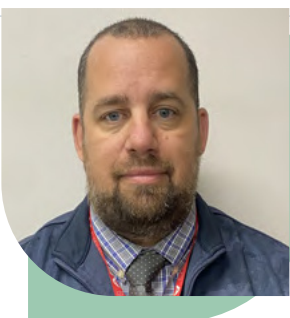
*Co-chair, CACH*

### **BACKGROUND:**

Emily is the inaugural Executive Director of Chicago Funders Together to End Homelessness (CFTEH), a collaborative of philanthropic partners working to address homelessness in the Chicago region. Prior to her role with CFTEH, Emily served as Deputy Policy Director in the Chicago Mayor's Office where she worked on issues related to housing and homelessness and served on the Board of Directors for Chicago's Continuum of Care. She began her career as a grant writer at Ignite. She holds a BA in English and Sociology from the University of Notre Dame and an MPA from the University of Michigan Ford School of Public Policy.

### **PARTNER WITH ME ON:**

Funder education, grantmaking, public-private partnerships, policy advocacy



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## *Ron Lund*

### **BACKGROUND:**

Ron has nearly 30 years of experience in government and nonprofit sectors. He currently serves as the Director of Mission Effectiveness and Agency Expansion at Project NOW, Inc., focusing on identifying growth opportunities and executing expansion strategies. Previously, he played a key role in expanding services to low-income and homeless populations during the pandemic. Ron is a Certified Nonprofit Professional and has been Board President of the Northwestern Illinois Continuum of Care for eight years.

### **PARTNER WITH ME ON:**

Rural homelessness, engaging CoCs, homelessness across state jurisdictions



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## *Susan Reyna-Guerrero*

### **BACKGROUND:**

Susan is the Chief Executive Officer at Covenant House Illinois.

Susan is a seasoned administrator and leader with more than 30 years of social service experience, all of which have been spent in the Chicago community. Susan has dedicated her career to focusing on helping to systematically advance the issues surrounding homelessness and its resulting impact on children and youth's mental health, physical health and overall wellbeing.

### **PARTNER WITH ME ON:**

Trauma informed services and practical solutions for young people in Illinois experiencing homelessness and housing instability



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## *Eugene Humphrey*

### **BACKGROUND:**

Eugene serves as the Executive Director of the Human Resources Development Institute (HRDI), where he leads the organization in its mission to provide comprehensive behavioral health services. Eugene is focused on achieving demanding performance targets, building strategic partnerships, and establishing initiatives that set industry standards, all within a stable business environment. His professional interests center on developing effective strategies that yield high-quality outcomes for programs supporting children, adults, and families facing both physical and behavioral health challenges. Eugene's commitment to enhancing the quality of life for service recipients is evident in his dedication to evidence-based health outcomes and collaboration with stakeholders across the healthcare ecosystem.

### **PARTNER WITH ME ON:**

Integrating mental health services with housing initiatives to create a comprehensive homelessness support network.



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## *Jose M. Muñoz*

### **BACKGROUND:**

Jose is the CEO of La Casa Norte, a leading organization in Chicago focused on serving youth and families facing homelessness. With over two decades of experience in the nonprofit and civic sector, he has championed initiatives addressing housing instability, youth empowerment, education, health, and safety. His leadership is deeply informed by his lived experience with homelessness, driving his commitment to creating impactful, sustainable change for vulnerable communities.

### **PARTNER WITH ME ON:**

Homelessness prevention and affordable housing solutions, youth empowerment, education, health and community initiatives, non-profit management and organizational strategy



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## *April Redzic*

### **BACKGROUND:**

April became President & CEO of DuPagePads in 2020 at the onset of the COVID-19 Pandemic. Now in its 40th year, DuPagePads' mission is to end homelessness, through street outreach, shelter provision, supportive housing, rapid rehousing, career services, and educational programming for children in shelter. April has been changing lives through social services for more than 20 years, and early in her career, founded the St. Sylvester literacy program for children in shelter. Today, she is spearheading Pads' pioneering model of interim housing at the state's first hotel-to-shelter conversion and also oversaw the start of DuPage County's first rapid rehousing program for domestic violence survivors.

### **PARTNER WITH ME ON:**

Family & individual homelessness, medical respite, housing as an indicator of health, supportive housing, rapid rehousing, homeless students, new models of shelter provision



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## *Carolyn Ross*

### **BACKGROUND:**

Carolyn is the President & CEO, All Chicago Making Homelessness History. All Chicago serves as the lead agency for the Chicago Continuum of Care, collaborating with more than 100 agency partners working to prevent and end homelessness in Chicago. She has years of experience working in the field of human services, homelessness prevention, behavioral health, child welfare and criminal justice. She has developed and implemented programs including prevention and intervention services for youth and families; prevention and Substance Use Disorder treatment for youth and adults; criminal justice diversion programs; and strategies to help build community capacity.

### **PARTNER WITH ME ON:**

Preventing and ending homelessness, systems-level change, supportive services and community partnerships



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## *Angie Walker*

### **BACKGROUND:**

Angie Walker is the Homeless Program Manager with the City of Rockford Health & Human Services Department. Angie oversees all homeless programs for the City including the HUD CoC/ESG programs, Single Point of Entry System for a two-county area, street outreach team, Rapid Rehousing, Mental Health Programs, and Medical Respite. Angie sits on the board of the Northern Illinois Homeless Coalition, is the Chair of the Coordinated Entry Committee, and the Mental Health & Homelessness Committee. Angie was recently appointed by Governor Pritzker to the Community Advisory Council on Homelessness for the State of Illinois. Under Angie's leadership, Rockford has been confirmed as reaching "functional zero" for both veterans and chronically homeless. Angie, along with her staff and partners, are now working diligently to end all homelessness for all in Rockford.

### **PARTNER WITH ME ON:**

Preventing and ending homelessness, local government leadership, rapid re-housing, intersection of mental health & homelessness



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## *Linda Warner*

### **BACKGROUND:**

Linda Warner completed her Master of Education from the University of Illinois at Urbana-Champaign in 1994. In 1997, she began working in social services, spending nearly 20 years in community mental health. In 2017, Linda began work at SWAN where she has worked in legal advocacy, adult protective services, and as Executive Director since 2020. SWAN is based in Olney, IL but provides an array of services across 16 rural counties. With nine offices throughout their 7,000 square mile service region, SWAN has been providing invaluable services to its rural community for 44 years. SWAN's homeless shelter and domestic violence shelter are both located in Olney. At SWAN, we shelter, protect, advocate, and assist.

### **PARTNER WITH ME ON:**

Rural homelessness and social services, domestic violence



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## *Monique Williams*

### **BACKGROUND:**

Monique Monique C. Williams is the Illinois Coordinator and Training & Technical Assistance Manager for the Supportive Housing Providers Association (SHPA), where she provides leadership, training, and strategic support to strengthen housing and service programs across the state. She brings more than a decade of professional expertise in housing, community development, and nonprofit leadership, as well as extensive lived experience that informs her approach to advocacy, equity, and restorative justice.

### **PARTNER WITH ME ON:**

Housing programs, community development, nonprofit leadership, restorative justice practices



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## *Nicole Wilson*

### **BACKGROUND:**

As Vice President of Community Investment, Heart of Illinois United Way, Nicole directs volunteer resource distribution and community impact activities across central Illinois. She manages grantmaking and programs including Supporting Student Success, the Home for All Continuum of Care and the 2-1-1 information and referral line.

### **PARTNER WITH ME ON:**

Community partnerships, government relations, grants administration, program development, outcome measurement and volunteer recruitment



# Letter from the Illinois Community Advisory Council on Homelessness

**Dear Illinois Interagency Task Force on Homelessness,**

The Illinois Community Advisory Council on Homelessness (“Council”) is honored to present our 2025 recommendations to the Interagency Task Force on Homelessness, as required by state law. These recommendations are offered independently of the Illinois Office to Prevent and End Homelessness (OPEH) and reflect the Council’s role as a collective voice for advocates, service providers, and people with lived experience of homelessness across our state.

ABOVE The panel at the Joint Meeting of the Illinois Interagency Task Force on Homelessness & the Illinois Community Advisory Council on Homelessness at the Home Illinois Summit in June 2025. From left to right: Dr. Sameer Vohra (Director, Illinois Department of Public Health), Monique Williams (Supportive Housing Providers Association, CACH member), Krista Faust (Executive Director, Illinois Housing Development Authority), Lizzy Whitehorn (Director, Illinois Department of Healthcare & Family Services), Jennifer Hill (Alliance to End Homelessness in Suburban Cook County, CACH member), and Emily Krisciunas (Chicago Funders Together to End Homelessness, Co-Chair of the CACH)

We are grateful for the leadership of Governor Pritzker, Chief Homelessness Officer Christine Haley, and partners across state government who have advanced meaningful progress on our 2024 recommendations. Recent achievements include:

- Launch of the Housing and Health Integration Paths Program, connecting people with serious mental illness leaving in-patient care to supportive housing in the community.
- Implementation of a third round of the Stability Investment for Families in Homelessness (SIFH) project, which provides direct cash assistance to families identified through schools, including doubled-up families.
- Expanded technical assistance and training for housing providers, helping organizations navigate zoning, development, and community engagement to bring more affordable housing online.

These accomplishments bring us closer to the vision outlined in the Home Illinois Plan: reaching “functional zero” homelessness and ensuring every Illinoisan has a safe place to call home. Yet, we cannot ignore the reality: homelessness is rising, emergency shelters are stretched, and affordable housing remains scarce. At the same time, federal actions—such as the U.S. Supreme Court decision in *City of Grants Pass v. Johnson* and new efforts to criminalize homelessness—threaten to deepen instability and fear in our communities. We are indeed at a tipping point.

Against this backdrop, the challenges facing service providers and public servants are immense. The issues we face are systemic: fragmented services, unsafe transitions from prisons and hospitals, outdated policies, and a strained workforce. With the recommendations outlined herein, we seek to address these systemic issues in partnership and collaboration with the State government. Together, we have the following opportunities:

- **From fragmented systems to unified partnerships:** By breaking down silos and fostering stronger collaboration across state agencies, local governments, providers, and communities, Illinois has the opportunity to create a more coordinated and effective response to homelessness.

- **From unsafe transitions to supportive pathways:** Improving discharge and reentry processes from prisons, juvenile justice, and mental health systems can ensure people exit into stability—not homelessness—by connecting them with housing, care, and community support.
- **From policy gaps to innovative solutions:** Updating outdated policies, simplifying processes, and equipping local governments with better tools can unlock smarter, more effective strategies to prevent and end homelessness.
- **From workforce strain to workforce investment:** Strengthening and resourcing the provider workforce creates an opportunity to build a more sustainable system—one that values frontline staff, expands capacity, and delivers consistent, high-quality care.

The problems we face today were not created overnight, nor can they be solved by one agency or level of government alone. But they *can* be solved—through coordination, vision, and shared commitment.

Our recommendations for 2025 focus on three key priorities:



**Strengthen cross-sector partnerships** between the Illinois Interagency Council on Homelessness, people with lived experience, and key state and local agencies to ensure coordinated planning, resource distribution, and service delivery



**Develop and implement state-led strategies, tools, and policy reforms**—in partnership with impacted communities and providers—to reduce systemic barriers, streamline processes, and equip local governments to more effectively prevent and address homelessness and housing instability.



Ensure **state funding and resources are strategically aligned** with the goals of the Home Illinois Plan and Council recommendations

Building a future where every Illinoisan has a stable home requires both immediate action and bold imagination. While we face headwinds of harmful policies and persistent crises, we remain steadfast in our belief that change is possible—and that Illinois can lead the way.

We deeply value our growing partnership with the Task Force and your ongoing dedication to preventing and ending homelessness. We extend special thanks to Chief Haley for her dedicated leadership. Together, we can create a future where safe and stable housing is not the exception, but the norm, for every person in Illinois.

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***In partnership,***

**Sherri Allen-Reeves**

*Executive Director, Phoenix Foundation, NFP*

**Tamela Milan-Alexander**

*Community Engagement Director, EverThrive Illinois/  
Representative of the Collaborative on Child Homelessness Illinois*

**Otha Gaston**

*Chicago Lived Experience Commission*

**John Herring**

*Executive Director, Illinois Network of Centers for Independent Living*

**Jennifer Hill**

*Executive Director, Alliance to End Homelessness  
in Suburban Cook County*

**Eugene Humphrey**

*Executive Director, Human Resources Development Institute (HRDI)*

**Marlena Kalafut**

*CDBG Program Manager, Economic and Community Development  
Agency*

**Niya Kelly**

*Director of State Legislative Policy, Equity and Transformation,  
Chicago Coalition for the Homeless*

**Emily Krisciunas**

*Co-chair, CACH  
Executive Director, Chicago Funders Together to End Homelessness  
(CFTEH)*

**Ron Lund**

*Community Services Director, Project NOW*

**Jose Muñoz**

*CEO, La Casa Norte*

**April Redzic**

*President & CEO, DuPagePads*

**Susan Reyna-Guerrero**

*Chief Executive Officer, Covenant House Illinois*

**Carolyn Ross**

*President and Chief Executive Officer, All Chicago*

**Angie Walker**

*Homeless Program Manager, City of Rockford Health &  
Human Services*

**Linda Werner**

*Executive Director, Stopping Woman Abuse Now, Inc. (SWAN)*

**Monique Williams**

*Illinois Coordinator Northern Region/Training TA Manager,  
Supportive Housing Partners Association (SHPA)*

**Nicole Wilson**

*Vice President of Community Investment,  
Heart of Illinois United Way*

# Progress on 2024 Recommendations

## 2024 RECOMMENDATION

## PROGRESS/STATUS UPDATE

### Strengthen relationships between Interagency Task Force and Community Advisory Council members to develop and inform intentional collaboration between State agencies to strategically address homelessness and the service support system

Strategically partner with the IL Department of Children and Family Services to identify families at risk of homelessness and to connect them into services to prevent homelessness.

- OPEH has received a Youth Homeless Systems Improvement (YHSI) grant from HUD (2024 - 2027). During the duration of this grant, OPEH is working with partners at Chapin Hall, the UIC School of Public Health, DCFS, DHS and the Night Ministry to (1) create an internship program for youth with experience of homelessness and systems involvement, where youth will work in DCFS and OPEH, and (2) link and analyze data sets from CoCs across IL, DCFS, and IDJJ to better understand the connection between foster care and juvenile justice systems and experiences of homelessness. The goal is for this data analysis to inform State services and discharge planning to prevent youth homelessness.
- Additionally, OPEH is in early conversations with DCFS to explore a pilot project related to youth aging out of foster care in FY26.

Partner with the Council, other community partners and State agencies responsible for discharge planning from institutionalized systems (i.e. IL Department of Corrections, Division of Mental Health) as well as from child welfare custody (eg. DCFS) to ensure individuals are not routinely discharged into homeless or shelter systems.

- In FY25, DMH (now the Division of Behavioral Health and Recovery as two DHS divisions merged) started the Housing and Health Integration Pathway program. This program works with Housing Forward to connect people with mental illness experiencing homelessness who are either being discharged from Madden or unsheltered (approx. 50/50 referrals) to transitional community-based supportive housing. This is a pilot program to improve discharges from Madden for people experiencing homelessness.
- DMH/DBHR has been implementing their other Home Illinois Plan commitments, such as hosting conversations with shelter providers, CoC leaders, and mental health providers across the state to better understand their current experiences serving clients connected to both DMH and the homeless service system and improve coordination and discharge planning.

**2024 RECOMMENDATION****PROGRESS/STATUS UPDATE**

OPEH and other state agencies should work with the Council to develop a plan to accurately count and adequately support individuals and families who are doubled up and/or couch surfing, including allowing for State-funded programs (without use of Federal dollars) to serve this population.

- In FY25, OPEH and partners implemented the third round of the Illinois [Stability Investment for Families Homelessness \(SIFH\)](#) project. This is a cash transfer research project looking at housing and other outcomes for families experiencing homelessness.
- The third round of SIFH worked with families identified through McKinney-Vento school liaisons, including doubled-up families. Outcomes from this project are currently being studied.

Continue to work with the Task Force and OPEH to implement the Home Illinois Plan including creating awareness about the plan and what it seeks to accomplish.

- OPEH is beginning to think about the process of developing the next Home Illinois Plan and will welcome opportunities for CACH members to support that development, such as hosting listening sessions at their organizations across Illinois.

## Increase interaction between people with lived experience of homelessness and the interagency task force

IDHS should partner with the Council, people with lived experience, and the public benefits work group to ensure that ILDHS is able to identify people who are homeless to ensure they receive all of the federal SNAP dollars they are entitled to receive, and to avoid thousands of people losing SNAP once the ABAWDs waiver goes away.

- DHS benefits area leaders and OPEH are currently having these conversations about concrete opportunities with the CACH Benefits Work Group.
- OPEH is in regular conversations with DHS-FCS leaders to understand the impact of new federal SNAP policy on people experiencing homelessness and is working with FCS leadership to host a webinar on the impact of these changes and how providers and clients can document their disability or work status to avoid benefit disruption.

Hold at least one yearly session dedicated to conversation between Interagency Task Force members and people with lived experience of homelessness.

- At the 2025 Home Illinois Summit, there was a joint plenary session which included conversation between Council and Task Force members. This and other networking opportunities at the Summit provided a meaningful opportunity for conversation.
- The September 2025 meeting of the Interagency Task Force included a presentation of the CACH's annual recommendations. This will be better timed this year to allow the CACH recommendations to influence agency budget cycles and planning processes for the next Home Illinois Plan.

2024 RECOMMENDATION	PROGRESS/STATUS UPDATE
<p>Consult with the Council and People with Lived Experience in the development of communications plans and engagement strategies that are developed in response to initiatives such as the Racial Equity Roundtable on Black Homelessness.</p>	<ul style="list-style-type: none"> <li>For FY25 and continuing in FY26, OPEH is working to implement the public communications recommendations that came out of the Black Homelessness report.</li> <li>A working group of CACH members is advising us on development of the campaign and has met numerous times. Additionally, feedback sessions have begun with a group of leaders with lived expertise from across the state convened by SHPA to advise on the development of the campaign.</li> <li>The campaign work is currently paused while FY26 procurement is finalized and will resume soon. The public-facing elements of the campaign are expected to launch in FY26.</li> </ul>
<p>State agencies should partner with the Council and people with lived experience to identify barriers to hiring and supporting people with lived experience. This should include specific roles related to addressing homelessness or housing instability as well as other roles within State government that may not be directly related to their lived experience. The State should work with the Council and people with lived experience to develop plans to address these barriers to hire and retain more people with lived experience within State government.</p>	<ul style="list-style-type: none"> <li>In FY26, OPEH will host several young adult interns with lived expertise. OPEH anticipates hosting approximately 5 interns (additional interns will be hosted within DCFS) by March 2027.</li> <li>These roles will initially be funded through our YHSI grant, but OPEH is evaluating opportunities to continue this program after the grant ends.</li> <li>Additionally, OPEH is doing a significant amount of position creation and hiring in FY25 and FY26 and has received additional insights into state hiring processes and requirements through this.</li> </ul>
<p>Consider ways to partner with people with lived experience to build out capacity within homeless services to provide SOAR services and assist in public benefits applications and appeals.</p>	<ul style="list-style-type: none"> <li>In FY25 through the TA Center, OPEH supported activities related to coordination and convening of SOAR providers across Illinois.</li> <li>Recently, SAMSHA announced that the national SAMSHA SOAR TA Center is ending August 18, 2025. OPEH is looking at opportunities to increase support for SOAR in Illinois due to this change in federal support and is considering options.</li> </ul>

## 2024 RECOMMENDATION

## PROGRESS/STATUS UPDATE

## Ensure timely and adequate resources to meet the growing demand for homeless services in Illinois

State resources and funding opportunities, including one-time pandemic recovery dollars, should align with priorities set out in the Home Illinois Plan and the Council's Recommendation Report to the Interagency Task Force. Ensure the disbursement of these resources assist in meeting targets developed through the Stella M modeling carried out by HomeBase in partnership with OPEH (as outlined in the Home Illinois Plan).

- The State resource OPEH controls most directly is the Home Illinois line item in the State budget. The Homebase projections are one important factor OPEH takes into account in distributing these funds and advocating for the prioritization of other funding sources.

Support the statewide coverage of 211 in order to assess how 211 centers across Illinois are working with CoCs across the state to meet the needs of those experiencing homelessness and to determine ways in which 211 can serve as an access point for diversion and other homeless services.

- In the Spring 2025 State legislative session, SB2194 passed and is now awaiting the Governor's signature. The passage of this legislation clarifies DHS' authority to support the growth of 211 statewide and look to support appropriate linkage into the homeless service system for housing requests.

Collaborate with the Council to review grantee administrative, data collection, and reporting requirements and assess what efforts can be made to reduce the burden on providers and streamline data. This assessment should include the necessary staffing structure needed within State agencies for grants management.

- As the Office of Housing Stability and OPEH continue to grow, they are working together to identify opportunities to make better use of the data we collect to improve our understanding of homelessness while also minimizing the burden on grantees.
  - For example, they are looking at the future of the reporting portals currently in use, as well as metrics.
- OPEH is hiring for several data and program evaluation-focused positions who can support this work.

When disbursing resources, State agencies should partner with CoCs to lead in how these resources are accessed and coordinated.

- OPEH and DHS currently looks to CoCs to lead project selection for several grants, including Homeless Prevention, Shelter Diversion, Rapid Rehousing, and Permanent Supportive Housing programs. This partnership has worked well and OPEH/DHS are looking at opportunities to expand it.

The Council fully affirms the FY26 Budget request put forward by Housing Action Illinois and the Illinois Shelter Alliance that calls for \$100 million in new funding for HOME Illinois initiatives.

- N/A

Partner with the Council and the public benefits work group to develop a proposal to build capacity within current funding structures to support SOAR advocacy, services, and IDHS public benefits access for people experiencing homelessness.

- See update above re: SOAR benefits + programming

# Recommendations to the Interagency Task Force on Homelessness from the Council

As established in Governor Pritzker’s Executive Order 2021-21 and codified into law in HB 2831, the Community Advisory Council on Homelessness is tasked with advising the Illinois Interagency Task Force on Homelessness on its mission to achieve “functional zero” homelessness in the State of Illinois. In pursuit of this goal, the Council will discuss and make recommendations on improving health and human services for those experiencing homelessness, strengthening housing stability, and unnecessary institutionalization.



ABOVE Council member Sherri Allen-Reeves, Executive Director of Phoenix Foundation, smiles at the 2025 HOME Illinois Summit.

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For more information, see <https://www.dhs.state.il.us/page.aspx?item=138563>



## PARTNERSHIPS & COLLABORATION

Strengthen cross-sector partnerships between the Illinois Interagency Council on Homelessness, people with lived experience, and key state and local agencies to ensure coordinated planning, resource distribution, and service delivery

### KEY OBJECTIVES:

Improve discharge processes and housing placement from institutionalized systems (i.e. Department of Corrections, Division of Mental Health, Department of Juvenile Justice)

Strengthen supports for young people and families

Foster collaboration in communications, awareness raising, and community engagement that centers people with lived experiences

**Improve discharge processes and housing placement from institutionalized systems (i.e. Department of Corrections, Division of Mental Health, Department of Juvenile Justice)**

The CACH commends the newly formed Division of Behavioral Health and recovery for the Housing and Health Integration Pathway Program, which works with Housing Forward to connect people with mental illness experiencing homelessness who are either being discharged from Madden or unsheltered to transitional community-based supportive housing. The CACH looks forward to learning from this pilot program and being a thought partner in how it can be improved or scaled up.

Too often, people leaving prisons, hospitals, or mental health facilities are discharged directly into homelessness, with shelters already stretched beyond capacity. This cycle is ineffective and fuels higher rates of recidivism back into those very systems. The growing criminalization of homelessness in Illinois—compounded by federal cuts to human services and new measures deploying the National Guard to police homelessness—threatens to make this revolving door between homelessness and institutions even worse. Therefore, we recommend that:

- Department of Corrections (DOC), Division of Behavior Health and Recovery (DBHR), Department of Juvenile Justice (DJJ), Department of Public Health (DPH), and Department of Children and Family Services (DCFS), and OPEH partner with the Council to ensure individuals are not routinely discharged into homelessness or shelter systems. A few specific examples include:
  - Strengthen cross-sector coordination for Medical Respite clients ready for discharge to stable housing in the community or higher levels of care, in order to bring all lengths of stay to 180 days or less. (*Illinois Medical Respite Capacity Building Initiative recommendation - See [Appendix C](#)*)

- The **Improving Benefits Access Workgroup** (See [Appendix B](#)) is exploring ways to increase the number of successful applications pre-release from jail/prison, which is particularly important given that the new federal laws may otherwise limit individuals' ability to receive Medicaid and SNAP long-term.
- Target Social Security Income (SSI) application assistance provided by DOC to those who are likely to be successful, including people who had been on SSI previously, seniors, and those who have spent time in a Residential Treatment Unit.
- Adopt best practices, including elements of SOAR, for supporting SSI applications to improve the success of prerelease applications.
- Adopt practices specific to pre-release applications at Developmental Disability Services (DDS) to increase the number of successful applications.
- Ensure that DDS within IL Department of Human Services (IDHS) can obtain and consider prior Social Security Administration (SSA) disability claims files and evidence for all prerelease claims submitted by individuals who had been on SSI previously, to ensure a full long-term record is considered.

Recently, the State legislature passed [HB 3761](#) which requires OPEH to have up-to-date information available on their website that outlines how a hospital or healthcare system may connect a patient experiencing homelessness. While this piece of legislation is important, the current reality is that hospitals often put a discharged patient in a rideshare and have them dropped off at a homeless shelter (often in the middle of the night). This is done without coordination with the shelter. Consequently, patients show up without a bed available for them. Often, they arrive with significant medical needs and the shelter also does not have capacity or resources to support their medical care. Accordingly, the website should:

- include training on diversion practices and a comprehensive list of accurate diversion programming that exists across the state. Further, there should be guidance to advise the healthcare system to discharge patients during normal business hours if discharging into the homeless shelter system and to coordinate

with shelters in advance to ensure bed capacity and resources to support the acute needs of the patient.

### Strengthen supports for young people and families

In order to reach functional zero, we must build coordinated, cross-system prevention strategies that help disrupt the intergenerational cycle of chronic homelessness. This requires data-sharing, service integration, and flexible supports that serve young people and families.

OPEH received the Youth Homelessness Improve (YHSI) grant from the US Department of Housing and Urban Development which funds programming through March 2027. We are thrilled that OPEH is working with Chapin Hall, UIC School of Public Health, the Night Ministry, the Department of Human Services, and DCFS to

- create an internship program for youth with experience of homelessness and systems involvement, where youth will work in DCFS and OPEH, and
- link and analyze data sets from CoCs across IL, DCFS, and IDJJ to better understand the connection between foster care and juvenile justice systems and experiences of homelessness. The goal is for this data analysis to inform State services and discharge planning to prevent youth homelessness.

- OPEH should continue to work with youth-serving organizations to design a continuum of services for young people who are navigating various systems, including the child welfare, homelessness, justice, and education systems. Currently, these systems do not effectively talk to each other, creating inconsistent and limited services to young people which ultimately leads to recidivism in the homeless and/or juvenile justice system.
- For example, the Illinois State Board of Education, OPEH, IL Department of Early Childhood, IDHS, and any other relevant state agencies should assess all funding sources and program models that exist to support young people (0-24 years old) with their educational attainment and overall well-being. This

assessment should seek to understand where there is duplication, where coordination can be strengthened, and how government agencies and providers can better serve young people and their families to help disrupt the intergenerational cycle of homelessness and poverty.

- Consider piloting a small program that replicates the Early Childhood Home Visiting model that would serve 5-18 year olds within a shelter to gauge its impact on school attendance and grades.

We applaud the work that is being led by OPEH to address the harm and trauma experienced by young people who are living in emergency shelters with their caregiver(s). The **Illinois Stability Investment in Housing (SIFH) pilot** launched in the spring 2023 – a one-time cash transfer program to help families experiencing homelessness – is a positive step to provide flexible and immediate support. The CACH recommends that:

- OPEH and other partners learn from this pilot and apply lessons learned to support ongoing efforts to address homelessness among young people and their families, including developing a plan to accurately count and adequately support individuals and families who are doubled up and/or couch surfing
- OPEH, IDPH, IDHS, DCFS, and Department of Early Childhood should collaborate to Increase prevention efforts to support pregnant and parenting families through more specialized rental assistance / direct cash
- OPEH should continue to strategically partner with DCFS and the CACH to identify families at risk of homelessness and connect them to services to prevent homelessness.

### Foster collaboration in communications, awareness raising, and community engagement that centers people with lived experience

- OPEH should continue to consult with the Council and people with lived experience in the development of communications plans and engagement strategies that are developed by State agencies in response to initiatives such as the Racial Equity Roundtable on Black Homelessness, Latine Roundtable on Homelessness, and development of an Indigenous Roundtable on Homelessness. This can be done by partnering with the Communications Campaign Work Group of the Council, for example. Additionally, the State should continue to include input from people with lived experience in the development of the HOME Illinois plan.



ABOVE Chief Homelessness Officer, Christine Haley applauds during the 2025 Home Illinois Summit.



## POLICIES & PRACTICES

Develop and implement state-led strategies, tools, and policy reforms—in partnership with impacted communities and providers—to reduce systemic barriers, streamline processes, and equip local governments to more effectively prevent and address homelessness and housing instability.

### KEY OBJECTIVES:

Improve workplace practices

Support homeless service providers to ensure seamless and quality care is provided to the homeless population across the state

Mitigate harm as a result of Federal actions and cuts on the current social safety net by improving current systems and processes for residents accessing services and benefits

Use the bully pulpit of the Governor's office and the State legislature to lead efforts to address homelessness

### Improve workforce practices

- All State agencies should partner with the Council and people with lived experience to identify barriers to hiring and supporting people with lived experience. This should include specific roles related to addressing homelessness or housing instability as well as other roles within State government that may not be directly related to their lived experience. The State should work with the Council and people with lived experience to develop plans to address these barriers to hire and retain more people with lived experience within State government.
- IDHS should conduct a statewide compensation study and develop standardized wages for the sector, building on previous, related compensation studies as available and as appropriate (*Workforce Work Group Recommendation - See [Appendix A](#)*)
  - Develop a Wage Setting Board (WSB) and technical review group (TRG) to reflect and reset the labor market for Homeless Service Provider workers - as identified in the Washington State Homeless Service Provider Workforce Study. Illinois could consider developing a wage setting board and technical review group to regularly assess and reset wages for workers in the sector.
- IDHS should provide healthcare solutions that increase access to and utilization of healthcare benefits for homeless service workers. The Workforce Work Group identified three specific interventions the state could consider related to healthcare solutions. (*Workforce Work Group Recommendation - See [Appendix A](#)*)
  - Subsidies for healthcare. Provide financial assistance via subsidies to support healthcare access and utilization for homeless service workers.
  - Provide health insurance to the field through the state's healthcare system.
  - Engage in sector-wide collaborative negotiations for health-related solutions.

- OPEH should formalize a centralized training hub for providers to access training, content experts, and other resources related to topics of interest and required learning. OPEH should consider leveraging and expanding the One System Initiative Digital Training Curriculum to meet the ongoing needs and demands of the homeless system across the state
- OPEH and ILDHS should assess the homeless sector's needs and preferences to enhance wellness and healing for the workforce and work to implement the recommendations generated
- OPEH should help support establishing Medical Respite as a unique intervention in the homeless services continuum (*Medical Respite recommendation - See [Appendix C](#)*)
  - Medical Respite providers and partners across the state have consistently encountered the need for official recognition of Medical Respite as a distinct program model in homeless services. For example, many Continuum of Cares (CoCs) do not recognize Medical Respite as a unique program model. A benefit of Medical Respite within Emergency or Transitional Housing categories will inform program outputs and outcomes data. A current consequence of Medical Respite only understood as Transitional Housing includes the impact of the Local Evaluation Instrument (LEI) and funding, specifically regarding successful exits, bed utilization and length of stay. Additionally, if Medical Respite is recognized as a housing stabilization resource, Medical Respite providers would be eligible for emergency and transitional housing resources, potentially opening additional sources of funding.

**Support homeless service providers to ensure seamless and quality care is provided to the homeless population, particularly marginalized populations, across the state**

- Build out tools and resources to help communities address challenges related to zoning for affordable housing and shelters across the state (e.g. develop toolkits on zoning, legislative recommendations)
  - IHDA should convene developers to understand roadblocks to developing affordable housing that is needed in a community (i.e. larger units)
  - OPEH should add a developer to the CACH
  - OPEH and IHDA should work with the CACH, community partners, and people with lived experience to build a communications campaign that seeks to address the negative perception of people experiencing homelessness (e.g. NIMBYISM). The campaign should be informed by best practices and research on shifting culture and attitudes
  - The CACH commends the work OPEH has done with IFF to develop curriculum supporting providers in navigating development processes, particularly zoning and related community engagement.
    - The State's TA center should build upon this to create targeted support to providers who are pursuing zoning permits for emergency shelter or transitional housing to foster the success of their project proposals. This could include increased outreach and awareness about the curriculum and surveying CoCs to better understand the ongoing challenges when navigating zoning and development in a particular community
- All State agencies that fund homeless services should collaborate with the Council to review grantee administrative, data collection, and reporting requirements and assess what efforts can be made to reduce the burden on providers and streamline data. For example, some State agencies require additional data reporting (e.g. Excel spreadsheets) with data that is already being collected via the Homeless Management Information System (HMIS) or InfoNet. This assessment should include the necessary staffing structure needed within State agencies for grants management
- Additionally, the State should assess internal capacity to write grant opportunities, triage applications, and administer funds to reduce the delays in funding for community partners. For example, homeless providers are awaiting grant agreements on programs that started June 1. Additionally, Medical Respite programs that ended June 30 are awaiting a new application from the State, which is not out for FY26. This has effectively stopped programming or shifted the financial burden to the provider. This is not sustainable, particularly when there are severe Federal cuts occurring across the social safety net.

- To address the Inconsistent and misapplication of the homeless shelter deduction, DHS should strengthen the homeless shelter deduction policy to ensure that people receive the maximum SNAP benefit they are entitled to, reduce errors, and simplify program administration by:
  - Expanding and clarifying the definition of allowable shelter costs under the Homeless Shelter Deduction to ensure consistent application. State policy should explicitly recognize nontraditional expenses such as small payments to friends or family for temporary accommodations, laundry services, vehicle-related costs for individuals residing in a car, and telephone expenses as qualifying shelter costs.
  - Revising the application and/or interview protocols to capture a broader range of shelter costs. Questions should explicitly prompt applicants to report non-traditional housing-related expenses—such as payments for temporary stays, vehicle-related shelter costs, and essential utilities—so that all eligible households can access the Homeless Shelter Deduction (*Improving Public Benefits Work Group Recommendation - [Appendix B](#)*)
- Notifying people who are applying online about their option to call the DHS Help Line and complete the interview on the phone immediately or go in-person to their local Family Community Resource Center (FCRC) to complete the interview 1-2 days after filing the application to complete the interview. (*Improving Public Benefits Work Group Recommendation - [Appendix B](#)*)
- The State's TA Center should provide coordinated legal support to CoCs across the state to assist them in navigating the challenges being created at the Federal level (i.e. EOs against marginalized populations; requiring to sign affidavits that align with President's EOs)
  - State policies and rules should not create added burden or confusion on providers who are already navigating an extremely difficult and chaotic Federal landscape

### **Use the bully pulpit of the Governor's office and State legislature to lead efforts to address homelessness**

### **Mitigate harm as a result of Federal actions and cuts on the current social safety net but improving current systems and processes for residents accessing services and benefits**

- To address the under identification of SNAP recipients who are homeless, DHS should consistently identify people experiencing homelessness during IDHS benefits application and redetermination by
  - Making the definition of homeless visible to applicants when completing the application for SNAP in ABE (the Application for Benefits Eligibility system) and at redetermination.
  - Modifying interview questions to appropriately identify people who meet the definition of homeless. (*Improving Public Benefits Work Group Recommendation - See [Appendix B](#)*)
- To address the issues with access to interviews, DHS should improve access to same day/on-demand interviews for people experiencing homelessness by:
  - Offering people applying in person who are identified as homeless a same-day interview; and
  - Address the increase in the criminalization of homelessness in the aftermath of the *Grants Pass* US Supreme Court case and the recent [Executive Order](#) from President Donald Trump that calls for the forcible and involuntary commitment of people living with mental illness.
  - Support and lead on efforts that seek to limit a municipality's ability to pass ordinances criminalizing homelessness.
  - The General Assembly should work to eliminate "crime-free housing and nuisance ordinances" to protect individuals and families from becoming unstably housed due to seeking help for violence that they or a loved one has experienced



## FUNDING & RESOURCES

### Ensure state funding and resources are strategically aligned with the goals of the Home Illinois Plan and Council recommendations and meet the ongoing demand

**Given the increase in homelessness across the state, we want to see an increase in resources that ensures that people experiencing homelessness do not die**

- IHDA, IDHS and OPEH should work with the CACH and other key partners to propose a capital strategy that helps to identify source of revenue for capital investments to renovate current shelters and to create new shelters to help expand emergency shelter beds, especially non-congregate shelter
- The FY27 State Budget should, at minimum, restore the funding that was cut in the FY26 Home Illinois line item of the budget
  - The Court-based Rent Assistance Program should be funded at \$75M per year for FY27
- Consider the cost of living and inflation when making budget decisions, particularly when considering cuts to programs. A reduction in programmatic funding ultimately means providers will further bear the brunt of increased costs leading to a reduction in workforce and fewer individuals in need of services served
  - Provide increased contract amounts to cover critical expenses for homeless service Workers. The state must ensure that the additional funding included in increased contracts is earmarked for increased wages; additional bed requirements cannot also be a requirement. (*Workforce Work Group Recommendation - See [Appendix A](#)*)
- Fund Emergency & Transitional Housing programming through General Revenue Funding (GRF), do not pull from the IL Affordable Housing Trust Fund
- The Comptroller's Office should release the amount included in the FY26 budget (\$7M) as providers are actively planning to use those dollars for winter-warming planning
- IDHS/OPEH should dedicate \$2.5 million in funding for Medical Respite programs to support care for recipients who are ineligible for Medicaid or whose service pathway falls outside of the future Medicaid Waiver, including post-transition housing assistance and services like medical equipment and transportation. (See [Appendix C](#))
  - This funding<sup>1</sup> would support critical Medical Respite care services that directly combat cyclical homelessness experienced by vulnerable populations, including patients discharged from hospitals to homelessness, and focus on costs associated with participants who are ineligible for Medicaid 1115 waiver reimbursement.

**“IF WE DO NOT GET MORE BEDS QUICKLY, PEOPLE WILL DIE.”**

**- APRIL REDZIC**  
PRESIDENT & CEO, DUPAGE PADS

<sup>1</sup> The funding request is in addition to the continued funding for the Illinois Medical Respite Capacity Building Initiative, to provide funding for medical respite service provision as a program within Emergency and Transitional Housing.

# Appendix A

## Stabilizing Illinois' Homeless Services Workforce: Initial Recommendations and Strategies

FY2025

# HOMELESS SERVICES WORKFORCE WORK GROUP

Interim Report

2025

Stabilizing Illinois' Homeless Services Workforce:  
Initial Recommendations and Strategies

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Prepared By:  
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# Workgroup Membership

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*This work would not have been possible without the participation of these working group members. Additional thanks to the Illinois Homelessness Education Training and Technical Assistance Center.*



# Context

In order to achieve functional zero—the sustainable milestone where a community has functionally solved homelessness—Illinois needs a stable homeless services workforce. However, as in many social service sectors, achieving this stability is a difficult task. A national 2024 survey of homeless services staff indicated that few workers have enough money to cover additional expenses beyond their basic needs and that workers of color are disproportionately impacted.<sup>1</sup>

The issues currently facing Illinois' homeless services' workforce are vast, including:


- Low wages
- Minimal benefits
- Limited professional development opportunities
- No defined career path
- Lack of advancement opportunities
- Burnout
- Workplace safety issues
- Job-related mental health, wellness, and secondary trauma issues

And, Illinois is facing a homeless services workforce shortage. A recent 2025 report projected that an additional 4,482 staff are needed across all positions, from frontline staff to direct services to executive leadership, to fully staff existing facilities and expand system capacity to reach functional zero.<sup>2</sup>

## **Definition: Workforce Stabilization**

Workforce stabilization refers to the process of creating and maintaining a consistent, reliable, and productive workforce by reducing employee turnover, filling staffing gaps, improving employee satisfaction, and ensuring that organizations have the right number of skilled workers to meet their operational needs over time.

Creating a stable workforce helps maintain productivity and service quality, reduces costs associated with high turnover and constant rehiring, and enhances organizational stability and resilience during periods of change or crisis.



“We’re seeing people crash and burn—not because they’re not good at the work, but because they’re carrying too much personally and professionally.” —Sherri Allen-Reeves, Phoenix Foundation

# The Process

To address these issues and support stabilization of the workforce, the Office to Prevent and End Homelessness (OPEH) launched a Homeless Services Workforce Work Group tasked with “creating an action plan on how to support community-based organizations to increase and stabilize their workforces.”<sup>3</sup> The Work Group met four times between May and June 2025.<sup>4</sup>

To help with initial framing, the group utilized the Job Design Framework developed by The National Fund for Workforce Solutions. This framework divides the elements of a “good job” into four pillars, which, if addressed, support recruitment and retention of a robust workforce.<sup>5</sup> The four pillars include:

1. **Core:** The basic elements of a good job including compensation, work environment, and supervision quality.
2. **Support:** Helping workers perform well and achieve stability through training, internal assistance, and external supports.
3. **Opportunity:** Helping employees advance in their careers and develop their skills through career development, mentoring and coaching, and acknowledgement.
4. **Voice:** Ensuring employees are empowered, engaged, and have agency.

## JOB DESIGN FRAMEWORK

**A FRAME OF RACIAL EQUITY AND INCLUSION**


Racial equity is essential for good jobs and good workplaces. You can start wherever you want in this framework, but the job elements listed below will have the most impact if you apply them with an equity mindset.

### The Pillars

CORE	SUPPORT	OPPORTUNITY	VOICE
<p><i>The basic elements of a good job</i></p> <p><b>Compensation</b> Sustainable pay and benefits</p> <p><b>Work Environment</b> Stable hours and scheduling Safety Job security</p> <p><b>Supervision Quality</b> Fairness and respect Open communication Anti-discrimination and anti-profiling policies Transparent grievance process</p>	<p><i>Help workers perform well and achieve stability</i></p> <p><b>Training</b> Entry-level training Cross-training</p> <p><b>Internal Assistance</b> Supervisory training Financial counseling Cash assistance Formal HR practices</p> <p><b>External Supports</b> Tax credits Childcare, transportation, housing (etc.) support</p>	<p><i>Help employees advance in their careers and develop their skills</i></p> <p><b>Career Development</b> Specialized training Educational benefits Formal career pathways</p> <p><b>Mentoring and Coaching</b> Peer mentorship Job coaching</p> <p><b>Acknowledgement</b> Internal and external recognition Leveling of perks Individual and team bonuses Other financial incentives</p>	<p><i>Employees are empowered, engaged, and have agency</i></p> <p><b>Engagement</b> Measurement of engagement Meaningfulness Mattering</p> <p><b>Improvement</b> Inclusive, continuous improvement processes</p> <p><b>Participation</b> Participatory management Autonomous teams Formal representation Employee stock ownership</p>

### The Result

Becoming an employer of choice is a strategy, not an accident. Designing your jobs for equity and inclusion will help you build a great company where your employees thrive.



During the first meeting, the Work Group used this framework to align on the most pressing challenges facing the workforce and identified specific strategies within each of these pillars to address known challenges, including: financial compensation; access to key benefits; workplace safety; professional development and training; career advancement; and talent pipelines.

From there, the group engaged in an iterative brainstorming process to identify initial solutions tied to each of the strategies. Brainstorming questions used “**how might we**” phrasing to allow for many possible solutions, spark creativity, and encourage collaboration.

- **How might we** ensure frontline homeless services workers are compensated fairly?
- **How might we** improve workplace safety for the homeless services workforce?
- **How might we** increase access to health insurance for the homeless services workforce?
- **How might we** increase access to paid time off for the homeless services workforce?
- **How might we** ensure homeless services staff receive the professional development and training they need?

In the third meeting, the Work Group bucketed their proposed solutions based on level of impact (e.g., local, system, or state) and ranked solutions on a priority scale of minor to critical based on workforce impact. This process surfaced three priority buckets the group wanted to explore further, including:

**CRITICAL PRIORITY | Increased Contract Funding to Address Compensation and Safety Needs**

- Conduct a state-wide compensation study and develop standardized wages
- Provide increased contract amounts to cover critical expenses, such as:
  - Cost of living (COLA) increases
  - Wage parity with ‘like’ state roles
  - Paid time-off
  - Safety measures (i.e., equipment, officers, etc.)
  - Legal funds for workers (e.g., funding to cover legal fees workers may incur related to stalking, etc.)

**HIGH PRIORITY | Health Care**

- Provide health-care solutions
  - Subsidies for health care
  - Provide health insurance to the field through the state
  - Engage in field-wide collaborative negotiations for health-related solutions

**MEDIUM PRIORITY | Professional Development**

- Establish a training hub for providers to access trainings, content experts, and other resources related to topics of interest and required learning



In the fourth and final meeting, the Work Group discussed initial feasibility questions related to the priority actions in order to surface implementation considerations and challenges. Discussion questions included:

- Who is most impacted by these solutions? Which staff members, which roles?
- Which organizations will be most impacted by these solutions (i.e., shelters, PSH, etc.)?
- How might these solutions be perceived by sector workers and leaders?
- How affordable are these solutions? Where could funding come from to implement these solutions?
- What capacity is needed to implement these solutions at an organizational, system, or state level?
- Which two ideas feel the most feasible to implement in the next 1-3 years?

What follows are the group's initial recommendations resulting from the process described above. These recommendations will continue to be vetted for feasibility, and implementation considerations and challenges will be addressed by the Work Group in FY26.

# Recommendations

The Work Group identified four primary recommendations for consideration ranging from a compensation study to a training hub aimed at standardizing and streamlining professional development training opportunities for the homeless service sector. The recommendations are organized in order of importance and priority as outlined above. Each recommendation is accompanied by a brief explainer and some also include an “implementation consideration” note. Given the limited time and capacity of the first phase of work, determining feasibility of the recommendations will be prioritized in the next phase of work.

**1. Conduct a statewide compensation study and develop standardized wages for the sector.** The working group advocated for a better understanding of sector-specific compensation ranges across the state. Specifically, the working group advocated for support of [HB 2695, the Human Services Equitable Pay Act](#), which proposes commissioning a compensation study on wages and benefits for the Illinois Human Services Sector and benchmarking the roles nationally. The Work Group suggested using the compensation study to guide the development of standardized wages for the sector across the state.

- **Implementation Consideration:** Develop a Wage Setting Board (WSB) and technical review group (TRG) to reflect and reset the labor market for Homeless Service Provider workers – as identified in the [Washington State Homeless Service Provider Workforce Study](#). Illinois could consider developing a wage setting board and technical review group to regularly assess and reset wages for workers in the sector.
- **Implementation Consideration:** The working group recognized that compensation studies can be costly to conduct annually. To mitigate costs, Illinois could consider identifying standardized roles to prioritize for an annual compensation study.

“Pay transparency gives not only organizations a better understanding of what others are paying, but it also gives workers the ability to activate if they see inequities.”

— Cosette Ayele, Illinois Partners for Human Services

**2. Provide increased contract amounts to cover critical expenses for homeless service workers.** The Work Group prioritized financial increases for homeless service staff to address the reality that workers are leaving the sector in search of better financial opportunities. Staff require increased (living) wages and/or increased benefits to support retention and achieve workforce stabilization.

- **Implementation Consideration:** The state must ensure that the additional funding included in increased contracts is earmarked for increased wages; additional bed requirements cannot also be a requirement.

“If workers aren’t compensated appropriately, and they don’t feel safe at work or can’t get health benefits, they’re not going to stay long enough for us to think about professional training or career advancement.” — April Redzic, DuPage PADS

- Specific critical expenses identified by the Work Group that have the most potential to support workforce stabilization include:
  - **Cost of living (COLA) increases.** Consider annual increases in wages to offset the effects of inflation, particularly frontline homeless service workers.
    - *Implementation consideration:* As identified in the Washington State Homeless Service provider workforce study, consider offering near-term wage increases for homeless service workers to address basic needs and stabilize the workforce as a bridge to more permanent solutions for the sector.<sup>6</sup>
  - **Wage parity with ‘like’ state roles.** Align wages in the homeless service sector with similar/like roles in state government (e.g., state social workers).
    - *Implementation Consideration:* Reclassify and/or further define certain homeless service workers as behavioral health workers and align wages accordingly.<sup>7</sup>
  - **Paid time-off.** Build paid time-off opportunities into state grants, enabling homeless service workers to take time off to care for themselves and their families without jeopardizing their income. This includes but is not limited to flexible scheduling (seasonal), comp time options, and paid wellness days for parents/families.
    - *Implementation Considerations:*
      - Implement a pilot grant program that incentivizes grantees to provide paid-time off options for staff.
      - To mitigate staff burnout, consider temporary staffing solutions to ensure adequate coverage and appropriate time off, particularly for staff working in 24-hour shelters and overnight facilities.

“We do summer Fridays where every Friday is paid time off—morale skyrocketed when we did that.” — Michael Herman, Chicago House

- **Safety measures.** Provide funding to support increased safety and security measures for homeless service workers (i.e., equipment, officers, etc.). Where applicable, leverage existing funding allocated for safety and security enhancements at shelters and other nonprofit partner providers.

- **Implementation Consideration:** Pilot the creation of a “safety fund” that homeless service organizations can access to improve organizational and employee safety. Organizations can submit a brief statement of need to access funds for a specific or discrete safety or security improvement project.
- **Legal funds for workers:** Provide funding to cover costs associated with legal fees workers may incur related to stalking or other safety or legal protections.
  - **Implementation consideration:** As identified in the Washington State Homeless Service provider workforce study, consider offering near-term wage increases for homeless service workers to address basic needs and stabilize the workforce as a bridge to more permanent solutions for the sector.

**3. Provide healthcare solutions that increase access to and utilization of healthcare benefits for homeless service workers.** Having access to healthcare supports and resources aids in stabilizing and supporting homeless service workers. Without access to these specific supports, workers are limited in their ability to perform their jobs effectively (e.g., if they are sick and don’t have access to affordable care) and workers are disincentivized to stay in the role or in the sector. The Work Group identified three specific interventions the state could consider related to healthcare solutions.

- **Subsidies for healthcare.** Provide financial assistance via subsidies to support healthcare access and utilization for homeless service workers.
- **Provide health insurance to the field through the state’s healthcare system.** Consider a process that enables homeless service workers to access the state’s healthcare benefits.
- **Engage in sector-wide collaborative negotiations for health-related solutions.** The Work Group acknowledges the need for a collective/unified approach to negotiating better health-related solutions. The resulting recommendation includes a role for the state as “primary negotiator” on behalf of the homeless service sector with the goal of securing better healthcare rates that organizations can access on behalf of their homeless service workforce.
  - **Implementation Consideration:** As identified in the Washington State Homeless Provider workforce study, consider expanding access to healthcare benefits for homeless service workers through a mechanism that allows employers to pool benefits.

4. **Formalize a centralized training hub for providers to access training, content experts, and other resources related to topics of interest and required learning.** The Work Group recognized that increasing workforce stabilization includes providing the opportunity for ongoing learning, capacity building and professional development opportunities for homeless service workers. Rather than establishing something new, the state can leverage existing training resources in a coordinated way to meet sector needs.

- **Topics of interest include:** safety specific topics (i.e., escalation warning signs and triggers, active shooter training); leadership training; interpersonal skills (i.e., empathy, teamwork, communication, negotiation, leadership and problem-solving); technical skills (i.e., organizational, computer, information, technology skills, conflict resolution and stakeholder engagement); mental health and substance use disorders; medications; client assessments; and trauma-informed care.
- **Implementation Consideration:** Consider partnering with regional workforce development councils to develop professional development training opportunities as well as career pathways for homeless service workers.

## Conclusion

While not exhaustive, the recommendations outlined in this memo address the most pressing challenges to workforce stabilization within the homeless services sector. These recommendations also align closely to the recommendations identified in the Illinois Homeless Service Workforce Needs report. Work Group members remain deeply committed to tackling critical staffing needs—both within their own organizations and across the sector as a whole. These and additional strategies such as career pathway development, worker reclassification, and additional advancement opportunities, are worthy of deeper exploration. We look forward to continued partnership to refine these recommendations further, assess their feasibility, and support the development of actionable implementation strategies for state consideration.



# Appendix A: Initial Solutions Brainstorm

This Appendix outlines the Work Group’s initial solution brainstorming process and supporting research used to inform final recommendations. Using the Job Design Framework as a guide, the group identified over 40 potential strategies across five key areas: **compensation, healthcare, paid time off, safety, and professional development**. Each solution was evaluated for feasibility, impact, and alignment with workforce stabilization goals.

The Appendix includes detailed solution buckets, implementation considerations, and insights from related research — particularly the Washington State Homeless Services Workforce Study and the Illinois Homeless Service Workforce Needs Report. These materials will serve as a foundation for future planning and policy development to ensure a more stable, supported, and sustainable homeless services workforce in Illinois.

## Compensation

Solution Bucket	Details
Cost of Living Increases (COLA)	Annually, specifically for emergency and transitional housing contracts
	Annually, for state and HUD contracts
Wage Standardization and Transparency	<ul style="list-style-type: none"> <li>*Conduct a statewide compensation analysis, factoring in regional costs of living</li> <li>*Pass the Human Services Equitable Pay Act (HB2695) (wage study)</li> </ul>
	Match state social worker salaries (e.g., DCFS workers) through an "auto-calculation" method
	Ensure wages are equal to wages the state pays for similar roles (e.g. IDHS staff)
	Develop a standard, state-wide salary range based on job title and tied to education & experience; require state contracts to pay staff within that range Advocate for pay transparency in job listings
	Survey frontline staff to understand how much more money they need to make a thriving wage
	Ensure minimum salaries are tied to Fair Market Rents
Larger/Increased Contracts	Provide higher reimbursement rates
	Ensure state grants fully cover the cost of salaries, particularly for emergency and transitional housing contracts
"Bonus" Pay	Pay holiday pay
	Pay hourly staff overtime wages when necessary
	Provide bonuses tied to performance or other metrics
	Provide housing stipends to cover the difference between wages and Fair Market Rents

## Health Care

Solution Bucket	Details
Advocacy	Advocate for universal health care
	Pass legislation that limits what insurers can charge nonprofit organizations for premiums
Subsidies	Provide subsidies to offset health care expenses
	Ensure state grants cover the cost of insurance, even as it rises
Stipends	Provide stipends for staff for out of pockets costs
Cost Reductions	Offer insurance cost reductions for participation in healthy lifestyle activities (e.g. documented exercise or weight loss)
Navigation	Provide a benefits navigator to help staff understand how they can access all the benefits of their health insurance
Collaborative solutions	Create a program where large corporations can "adopt a housing agency" and provide their insurance benefits through their payroll
	Facilitate a Multiple Employer Welfare Arrangement (MEWA) to treat insurance as a co-op
	Engage in collective rate setting by having organizations negotiate together with insurance brokers
	Provide health insurance for workers through the state

## Paid Time Off

Solution Bucket	Details
Flex Time	Provide paid wellness days
	Provide additional PTO around the holidays (e.g., 2 weeks for summer and winter break)
	Offer summer hours (e.g. every Friday off during the summer)
	Build PTO into state grants and contracts
Comp Time	Provide days off or other incentives for extra hours worked
	Allow staff who are parents/guardians to have days off when school is not in session (without taking PTO)
	Allow staff to participate in advocacy efforts without using PTO

## Staffing

Solution Bucket	Details
Temp Staffing	Establish a "sub pool" that can be accessed to fill in staffing gaps as needed
	Establish a shared temp pool to avoid the cost of using temp agencies
	Leverage graduate-level interns for coverage on "slow days"
Career Pathways	Establish detailed careery pathway map for the homeless services sector

## Safety

Solution Bucket	Details
Equipment	Provide cameras
	Provide an electronic alert system
	Provide necessary safety equipment (e.g. metal detectors, vests, security wands, screening machines)
Training	Provide centralized, standardized training on universal topics (e.g., escalation warning signs and triggers, active shooter training, etc.)
Protocols	Develop standard, statewide safety policies for shelters
Staffing	Ensure sufficient shift coverage to ensure safe client-to-worker ratios
	Provide onsite security officers, particularly in evenings and over-nights
	Provide a nurse on-site for emergencies
Legal Precautions	Provide a funding pool staff can access to support legal fees related to stalkers, harassment, threats, etc.
Insurance	Ensure every organization pays for liability insurance
External Support	Provide connection to a non-police mobile crisis team
	Provide a dedicated/branded vehicle organizations can use for street outreach
Police Supports	Develop geographic bases parnterships/intervientions with police chiefs
	Provide a state officer for shelters with capacity of more than 100 during evenings and overnights, as requested

## Professional Development

Solution Bucket	Details
Supervisory Training	Provide frontline staff with training to help them advance into management positions
Safety Training	Provide centralized, standardized training on universal topics (e.g., escalation warning signs and triggers, active shooter training, etc.)
Training "Hub"	Ramp up, develop training for homeless service providers across a variety of topics

## Additional Benefits

Solution Bucket	Details
Pension	Allow staff to participate in state pension program
Individual Development Accounts	Offer Individual Development Accounts (IDAs)
Telework Options	Allow staff to work from home as appropriate (e.g., desk work can be completed at home)

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# Appendix B

## Improving Access to Benefits Workgroup - CACH Recommendations

The Improving Access to Benefits Workgroup was established as part of the Community Advisory Council on Homelessness to identify and prioritize a set of recommendations and state-focused strategies to increase access to public benefits for people experiencing homelessness. The Workgroup began meeting regularly this spring and identified two primary areas of focus: improving access to the Supplemental Nutrition Assistance Program (SNAP) and improving access to SSI and SSDI for people who are reentering the community.

### Federal Context

The budget reconciliation package (H.R 1) recently passed by Republican lawmakers, enacts sweeping cuts to Medicaid and SNAP, paired with expanded work requirements and cost-shifts to states. These changes, among others in the bill, are projected to deprive millions of people—particularly low-income and immigrant households—of essential support. At the same time, state agencies will face significant administrative burdens, eroding the infrastructure that communities rely on to meet people’s basic health, food, and economic security needs.

In addition, the federal government has ended technical assistance for compiling SSI applications using SOAR to help ensure applications are more successful. SOAR (SSI/SSDI Outreach, Access, and Recovery) is a program designed to help individuals experiencing or at risk of homelessness access Social Security disability benefits. The result is that there is not the same support for those at highest risk to apply for SSI benefits using best practices.

Given this backdrop, the working group has prioritized recommendations that can help equip the state to better respond to the federal threats on the horizon and will continue to work with state agencies to mitigate harm as the federal law is implemented.

### Area of Focus: Improving Access to SNAP

#### *Current Barriers to Accessing SNAP*

Workgroup members have identified three barriers that are preventing people who are homeless in Illinois from obtaining and maximizing SNAP benefits.

- Under identification of SNAP recipients who are homeless
- Inconsistent and misapplication of the homeless shelter deduction
- Inconsistent access to interviews

### Recommendations

To address the under identification of SNAP recipients who are homeless, DHS should:

- Consistently identify people experiencing homelessness during IDHS benefits application and redetermination by:
  - Making the definition of homeless visible to applicants when completing the application for SNAP in ABE (the Application for Benefits Eligibility system) and at redetermination. Modifying interview questions to appropriately identify people who meet the definition of homeless.

To address the Inconsistent and misapplication of the homeless shelter deduction, DHS should:

- Strengthen the homeless shelter deduction policy to ensure that people receive the maximum SNAP benefit they are entitled to, reduce errors, and simplify program administration by:
  - Expanding and clarifying the definition of allowable shelter costs under the Homeless Shelter Deduction to ensure consistent application. State policy should explicitly recognize nontraditional expenses such as

small payments to friends or family for temporary accommodations, laundry services, vehicle-related costs for individuals residing in a car, and telephone expenses as qualifying shelter costs.

- Revising the application and/or interview protocols to capture a broader range of shelter costs. Questions should explicitly prompt applicants to report nontraditional housing-related expenses—such as payments for temporary stays, vehicle-related shelter costs, and essential utilities—so that all eligible households can access the Homeless Shelter Deduction

To address the issues with access to interviews, DHS should:

- Improve access to same day/on-demand interviews for people experiencing homelessness by:
  - Offering people applying in person who are identified as homeless a same-day interview; and
  - Notifying people who are applying online about their option to call the DHS Help Line and complete the interview on the phone immediately or go in-person to their local Family Community Resource Center (FCRC) to complete the interview 1-2 days after filing the application to complete the interview.

### **Area of Focus: Improving Access to SSI/SSDI Prerelease**

Housing, healthcare, and income are basic but crucial components to a person's successful reentry after incarceration. For many people, finding employment is their path to financial stability. However, for people with disabilities, Social Security Disability Insurance (SSDI) and/or Supplemental Security Income (SSI) is key to providing a stable income source.

Working group members have observed that many people who would be eligible for SSI or SSDI at release have not submitted an application, do not receive a determination prior to release, or receive a determination denying the application for reasons other than a medical determination. They have also noted that given a limited time window when an application may be granted prior to release, timing itself may defeat successful application.

The Improving Benefits Access Workgroup is exploring ways to increase the number of successful applications pre-release, which is particularly important given that the new federal laws may otherwise limit individuals' ability to receive Medicaid and SNAP long-term.

### **Recommendations**

- Target SSI application assistance provided by IDOC to those who are likely to be successful, including people who had been on SSI previously, seniors, and those who have spent time in a Residential Treatment Unit.
- Adopt best practices, including elements of SOAR, for supporting SSI applications to improve the success of prerelease applications.
- Adopt practices specific to pre-release applications at DDS to increase the number of successful applications.
- Ensure that DDS obtain and consider prior SSA disability claims files and evidence for all prerelease claims submitted by individuals who had been on SSI previously, to ensure a full long-term record is considered.

# Appendix C

## Illinois Medical Respite Capacity Building Initiative - CACH Recommendations

### Summary

Medical Respite providers and stakeholders across Illinois submit the following recommendations for consideration by the Community Advisory Council on Homelessness:

1. Dedicate \$2.5 million in funding for Medical Respite programs to support care for recipients who are ineligible for Medicaid or whose service pathway falls outside of the future Medicaid Waiver, including post-transition housing assistance and services like medical equipment and transportation.
2. Establish Medical Respite as a unique intervention in the homeless services continuum.
3. Strengthen cross-sector coordination for Medical Respite clients ready for discharge to stable housing in the community or higher levels of care, in order to bring all lengths of stay to 180 days or less.

As stakeholders in our collective mission of Functional Zero, we request your consideration of these recommendations to be included in the formal recommendations submitted to the Illinois Interagency Taskforce on Homelessness.

### Background

The Illinois Public Health Institute (IPHI) manages the Illinois Medical Respite Capacity Building Initiative (IMRCBI). The IMRCBI grant is funded by the Office to Prevent and End Homelessness (OPEH) in alignment with the Home Illinois Plan. The Home Illinois Plan identifies Medical Respite as a strategy to disrupt chronic homelessness, hospitalization, and continuous cycles through the emergency room.

Medical Respite, also known as Recuperative Care, as defined by the National Institute for Medical Respite Care, is acute and post-acute care for people experiencing homelessness who are too ill or frail to recover from an illness or injury on the streets or in a shelter, but who do not require hospital-level care.

In fiscal year 2025, the IMRCBI provided grant funding to 22 sub-awardees, with plans to expand support to 30 in fiscal year 2026. Progress is being made on this year's Capacity Building program, with an estimated 20 returning sub-awardees across the state. Additionally, strategic outreach is underway to identify up to 10 new sub-awardees, specifically targeting areas in Illinois that currently lack Medical Respite resources. The IMRCBI provides funding to direct service providers, municipalities, and healthcare systems to plan and design Medical Respite programs, implement, and build capacity for operating programs. While the IMRCBI is a critical resource to expand and support capacity building for Medical Respite services across Illinois, there is also a need for separate grant funding to support Medical Respite service provision.

Medical Respite is a proposed service under the approved 1115 Waiver Benefit for Housing Related Service Needs. Service providers across the state are convening through the IMRCBI to prepare for the transformative funding opportunities the 1115 Waiver could bring through reimbursements. While 1115 Waiver reimbursements have the potential to stabilize operating costs, based on other Medicaid reimbursement rates, it is expected that the rate for Medical Respite will not cover 100% of costs for Medicaid patients, nor will it impact program costs for clients who are not eligible for Medicaid reimbursement. Consequently, there are funding gaps Medical Respite providers are grappling with addressing.

The following recommendations reflect needs specifically to sustain this important homelessness response when serving people ineligible for Medicaid-covered services, whose service pathway falls outside the allowable stipulations.

For instance, through the IMRCBI we have learned that approximately 10% of referrals come from street outreach programs. At this time, referral from street outreach will not be eligible for reimbursement from Medicaid. Additionally, another 10% of regular participants are ineligible for Medicaid coverage due to citizenship status.

Medical Respite programs are clear that they will respond to the needs of the community and not exclude people from service who are ineligible for Waiver reimbursement, when it becomes available.

As a statewide capacity building initiative supported by OPEH, IMRCBI met twice to collate suggested recommendations to include in the *Recommendations to the Illinois Interagency Task Force on Homelessness* report. Members of the IMRCBI include statewide representatives from homeless service providers, healthcare systems, and municipalities.

## Recommendations

**CACH Recommendation Framework:** *Ensure state funding and resources are strategically aligned with the goals of the Home Illinois Plan and Council recommendations*

- The first recommendation is to create a State grant within the Emergency and Transitional Housing program specifically for Medical Respite, allocating \$2,500,000 beginning in FY27. This funding<sup>2</sup> would support critical Medical Respite care services that directly combat cyclical homelessness experienced by vulnerable populations, including patients discharged from hospitals to homelessness, and focus on costs associated with participants who are ineligible for Medicaid 1115 waiver reimbursement.

The request detailed below represents partial funding of the total cost of operating Medical Respite for patients that will be ineligible for Medicaid reimbursement. Medical Respite service providers will also leverage hospital funding and integrate braided funding models. Medical Respite programs operate at higher costs to service providers than typical shelter models.

The \$2.5 million would go for several core components:

- \$1.971 million would go to Medical Respite programs in operation and move from the current capacity building

phase of development to permanent program funding operations. Funds awarded under this program will specifically support program participants who do not receive Medicaid, who need Respite but are referred outside of the Waiver's determination process, or who need transition support to housing to make space for future referrals. The following was taken into consideration to calculate the majority of the funding request, \$1.9M:

- The estimated average cost per bed to operate Medical Respite is \$170/day<sup>3</sup>
- The estimated average per diem from referral partnerships, grant-based, or reservation model is \$100/day<sup>4</sup>
- The average number of Medical Respite beds across Illinois is 1804, serving an estimated 400 people a year<sup>5</sup>
- An estimated 30% of beds are occupied at any given time by Medicaid-ineligible patients or Medicaid insured patients who do not meet the proposed reimbursement criteria
- Therefore, there are approximately 54 statewide beds ineligible for Medicaid reimbursement at any given time for 365 days a year. The majority of the funding request for fiscal year 2027 is to match the average per diem, grant-based, and reservation model rates:  $(\$100 \times 54 \text{ beds}) \times 365 \text{ days} = \mathbf{\$1,971,000}$
- Core Medical Respite care services include:
  - 24-hour access to a bed
  - 3 meals/day
  - Transportation to medical appointments
  - Wellness check at least 1x every 24 hours by Medical Respite staff

<sup>2</sup> The funding request is in addition to the continued funding for the Illinois Medical Respite Capacity Building Initiative, to provide funding for medical respite service provision as a program within Emergency and Transitional Housing.

<sup>3</sup> The estimated average daily cost per bed was determined by rates shared with HFS and Milliman via the Medical Respite Technical Work Group; services include room and board, case management and social services, food, and medical care commensurate with the level of care onsite.

<sup>4</sup> The IL Medical Respite Capacity Building Initiative funds providers across the state to design, plan, and begin operating Medical Respite programs; a key objective and outcome of the IMRCBI is to increase the number of Medical Respite beds.

<sup>5</sup> An estimated 400 Medical Respite annually served was determined through data collected within the Cook County Medical Respite Network, beds counts outside of Cook County, and average bed turnover rates

- An additional **\$529,000** would be available for programs to request funding for transportation to medical appointments and support services,<sup>6</sup> and providing staff with “adequate equipment to complete their job functions and roles,”<sup>7</sup> and basic medical supplies. As noted above, a wellness check (clinical or non-clinical) is required every 24 hours.
- Examples of costs incurred by Medical Respite programs include:
  - Medical supplies and equipment such as diabetic testing, dressing changes, shower chair walker, wheelchair, bedside commode, diabetic shoes
  - Transportation to medical appointment for Medicaid ineligible patients including patients with recurring appointments per week, such as dialysis
  - Community transitions to next step housing programs like Medical Bridge

**CACH Recommendation Framework:** *Develop and implement state-led strategies, tools, and policy reforms—in partnership with impacted communities and providers—to reduce systemic barriers, streamline processes, and equip local governments to more effectively prevent and address homelessness and housing instability.*

- The second recommendation is for Medical Respite care to be recognized by the State as a distinct program type of shelter or temporary housing intervention in the homeless services continuum.

Medical Respite providers and partners across the state have consistently encountered the need for official recognition of Medical Respite as a distinct program model in homeless services. For example, many Continuum of Cares (CoCs) do not recognize Medical Respite as a unique program model. A benefit of Medical Respite within Emergency or Transitional Housing categories will inform program outputs and outcomes data. A current consequence of Medical Respite only understood as Transitional Housing includes the impact of the Local Evaluation Instrument (LEI) and funding, specifically regarding successful exits, bed utilization and length of stay. Additionally, if Medical Respite is recognized as a housing stabilization resource, Medical Respite providers

would be eligible for emergency and transitional housing resources, potentially opening additional sources of funding.

State leadership on this issue will help with discussions at the local Continuum of Care level, a body often looked to for funding alignment and eligibility as a connection to Emergency Solutions Grant funding among other activities.

**CACH Recommendation Framework:** *Strengthen cross-sector partnerships with the Taskforce, PWLE, & key state and local agencies to ensure coordinated planning, resource distribution, and service delivery—particularly for populations at risk of or exiting systems into homelessness*

- The third recommendation is to strengthen cross-sector coordination for Medical Respite clients ready for discharge to stable housing in the community or higher levels of care, to bring all lengths of stay to 180 days or less, the maximum number of days eligible for Medical Respite 1115 Waiver reimbursement.

A significant concern for Medical Respite providers is that without discharge to stable housing, the cycle of chronic homelessness and hospitalizations continues. A direct service provider in Cook County noted, “We have seen the ‘lag’ in timing between medical stability and a housing match/opportunity through [Coordinated Entry]. We currently have 10 clients at respite that have been medically cleared but no match identified through CE yet.” Some providers adhere to policies that do not permit clients to be exited to homelessness. Therefore, an additional consequence of limited opportunities to discharge to stable housing is low bed turnover rates. Our recommendation is for dedicated post respite transitional housing or housing prioritization for clients ready for discharge.

An alternative and necessary Medical Respite discharge option is access to higher levels of care, such as skilled nursing facilities and residential treatment programs. A referral requirement for Medical Respite includes independent activities of daily living (ADLs). Medical Respite programs do not have the resources or staff to care for someone who needs 24-hour support to bathe, shower, dress, use the toilet, eat, etc. Medical Respite

<sup>6</sup> NIMRC Standard 5: Medical Respite program assists in health care coordination, provides wrap-around services, and facilitates access to comprehensive support services.

<sup>7</sup> NIMRC Standard 7: Medical Respite care personnel are equipped to address the needs of people experiencing homelessness

providers experience situations in which the referral source reports the ADLs inaccurately and the client needs high levels of care. The recommendation includes a recognition of higher levels of care in the continuum of homeless service providers and strengthened cross-sector coordination to include collaboration with these entities including skilled nursing facilities, and residential treatment programs.

Thank you for your time and consideration.

In Partnership,

Illinois Public Health Institute on behalf of the Illinois  
Medical Respite Capacity Building Initiative<sup>8</sup>

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<sup>8</sup> Programs that are part of the Illinois Medical Respite Capacity Building Initiative as of FY 2025 are: Beds Plus Care, Inc., Blessing Health System, City of Rockford, Connections for the Homeless Inc., Cornerstone Community Outreach, Franciscan Outreach, MacNeal Hospital, Heartland HOUSED, Home Sweet Home Ministries, Joliet Township c/o Will Grundy Medical Clinic, Journeys The Road Home, Lawndale Christian Health Center, Madison County Health Department, PADS Lake County, Phoenix Community Development Services, Project Now, Inc., Respond Now, Swedish Hospital Foundation, Take Action Today Inc., The Boulevard of Chicago, Inc., The Inner Voice Inc., The Night Ministry